

For Adviser use only

# talbotandmuir

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## Data capture form

### 1 Personal details

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Title

Surname

Forename/s: (in full)

Date of birth

Country of birth

Sex

Marital status

Spouse's/partner's name

Spouse's/partner's  
date of birth

Permanent residential  
address including  
postcode

Date moved to this  
address

*(If you have lived there  
for less than three years,  
your previous permanent  
residential address)*

### Contact numbers

Home

Office

Mobile

Email address

National Insurance  
Number

Intended retirement age

## 2 Status

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Your client's status is

Employed

Caring for child(ren) under 16

Self Employed

Caring for person over 16

Pensioner

Full time education

Child (under age 16)

Unemployed

Other (please specify)

(Employment details  
if employed or trading  
details if self-employed)

Job title/occupation

Earnings/profits in  
current tax year

Date money purchase  
annual allowance  
applicable

### 3 Contributions

(Payment methods include Standing Order, BACS or Direct Credit)

|                                                         |     |                  |   |                |
|---------------------------------------------------------|-----|------------------|---|----------------|
| Regular contributions                                   | £   | Member (net)     | £ | Member (gross) |
|                                                         | £   | Employer (gross) |   |                |
| This will be paid (Ad hoc/<br>monthly/quarterly/yearly) |     |                  |   |                |
| Single contributions                                    | £   | Member (net)     | £ | Member (gross) |
|                                                         | £   | Employer (gross) |   |                |
| Contributions to be paid<br>by third party              | Yes | No               |   |                |

### 4 Source of wealth and funds

|                                           |        |             |
|-------------------------------------------|--------|-------------|
|                                           | Member | Third party |
| Income from employment                    |        |             |
| Savings and/or investments                |        |             |
| Inheritance                               |        |             |
| Divorce settlement                        |        |             |
| Transfer from another<br>regulated scheme |        |             |

## 5 Details of transferring schemes

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|                                                                                                                                | Transfer 1 |    | Transfer 2 |    | Transfer 3 |    |
|--------------------------------------------------------------------------------------------------------------------------------|------------|----|------------|----|------------|----|
| Company/Scheme name                                                                                                            |            |    |            |    |            |    |
| Policy number(s)/<br>Scheme Reference                                                                                          |            |    |            |    |            |    |
| Type of Scheme                                                                                                                 |            |    |            |    |            |    |
| Transfer value<br>(or estimate):                                                                                               |            |    |            |    |            |    |
| Is this the full plan value?                                                                                                   |            |    |            |    |            |    |
| Transfer State?                                                                                                                |            |    |            |    |            |    |
| Transfer will be made:<br>(cash/In specie)                                                                                     |            |    |            |    |            |    |
| Does this transfer have a<br>protected pension age?<br>(if these boxes are left<br>blank, we will assume the<br>answer is no). | Yes        | No | Yes        | No | Yes        | No |

## 6 Investment intentions

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Investment Manager:  
(if applicable)

Address

## 7 Expression of wishes

| Name and address | Relationship | % of benefit |
|------------------|--------------|--------------|
|                  |              |              |
|                  |              |              |
|                  |              |              |
| Total            |              | 100%         |

For literature in alternative formats, such as Braille, large print, audio or E-Text, please call us on 0115 841 5000 (or via Relay UK on 18001 0115 841 5000).

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