A F Blakemore Retirement Savings Plan Application Form

Return to HR Shared Services: A F Blakemore & Son Ltd, Longacres Industrial Estate, Rosehill, Willenhall, WV13 2JP

Surname				Forename		
Employee No				Title		Mr / Mrs / Miss / Ms
Birth Date				Sex		Male / Female
Depot/Store				Department		
NI Number				Marital Status	<u> </u>	
Address						1
Email						
our funds will automatically be inverogramme. Once enrolled, you will count. Jease select your chosen retirement 5. Please note that whatever age your county determines the default investigation.	have the oppor age – between u choose now, y	tunity to	o choose an alte	rnative investn	nent fund via you ection, your selec	r online Aviva My Money ted retirement age will be
	•					
Target Retirement Age (please choose an age between 55 and 75)						
our Contributions lease indicate how much you would acrements of ½% e.g. 5%, 5.5%, 6%		te. Thi	s can be any am	ount between	5% and 100% of	Pensionable Earnings, in
I would like to contribute the following percentage of Pensionable Earnings (Your Employer will also pay 5% of your Pensionable Earnings).						%
Have you had or will you receive any benefits from other pension arrangements? If yes, please provide full details						Yes / No
Have you drawn any previous pension benefits or tax free cash sums? If yes, please provide full details						Yes / No
Are you registered for Primary, Enhanced, Fixed or Individual Protection? If yes, do not join without taking financial advice						Yes / No
he Trustees of the Scheme are registed by the Aviva I consent to the Trustees of the Aviva I consent to the Trustees of the Aviva I consend the Aviva I consend the I cons	Master Trust (in rmation for the page of a member of	cluding purpose	any third party of of the administr	ontractors they ation of the Sc	may use to carr heme.	y out the services on their
EMPLOYEE SIGNATURE: Dat						
OR COMPLETION BY THE COMP	ANY (please us	se capi	tal letters)			
Date Joined Company:			Date Joined S	cheme/Fund:		
Current Gross Salary:			Current Pension Salary:	onable		
Category: *delete as appropriate	Salaried		Non salaried			
Pension Contributions Rates (minimum Employee Rate 5%):	Employee:	%	Company:	5%		
Date appears on first payroll file:						
Signed on behalf of the Company:			Print Name:			
Date:						