

CHANGES TO ADVISER CHARGE FREQUENCY/DATE

(INCLUDING FLEXIBLE ADVISER REMUNERATION)

What is this form for?

To change the frequency and/or payment date for existing ongoing adviser charges and to change the frequency for Flexible Adviser Remuneration for a: Retirement Wealth Account, The Personal Pension, The Section 32, The Executive Pension or a Trustee Investment Plan. If you have a:

- Phoenix Wealth Pension Funds only plan please write to Phoenix Wealth, Unit Linked Life & Pensions, PO Box 1393, Peterborough, PE2 2TP.
- Retirement Wealth Account self-invested plan please write to Phoenix Wealth, Self Invested Pensions, PO Box 1394, Peterborough, PE2 2TQ.

Any section not fully completed could result in the form being returned and a delay in setting up your new instruction.

Notes

This form must be received at least 10 working days before any changes are due to take effect.

Ongoing adviser charges and Flexible Adviser Remuneration are together referred to as 'adviser payments'.

This change will apply across all contribution sources or the part or parts of your policy that the adviser payment applies to.

Your existing adviser payments will be spread across the new frequency you choose. For example, if you pay 0.6% per year and you choose to pay monthly, it will be divided by 12, so 0.05% will be paid each month.

Ongoing adviser charges

If you have not received an illustration from your Financial Adviser that shows the impact of the deduction of the proposed ongoing adviser charge on your projected pension fund value, please tick this box and we will send you one.

If you have received this already, then please include your illustration reference number in section 1.

For full details of how adviser charges can be facilitated through your policy, please refer to the 'Adviser payments' section of your **Terms & Conditions/Policy provisions or Endorsement**.

Flexible Adviser Remuneration (FAR)

It is no longer possible to set up new FAR arrangements as a method for paying for advice on a new policy or existing policies where advice and services are given. Any recurring FAR already in payment to your financial adviser for ongoing advice you receive can continue but the overall amount cannot be increased. However, you may change the frequency of your FAR payments.

If the change results in FAR being paid less frequently, the change will take effect from the next anniversary date of the existing FAR payment. This will ensure that we do not pay more FAR in a policy year than was disclosed in the original pre-sale illustration.

If the change results in FAR being paid more frequently, the change will take effect from the date the next FAR payment, on the existing basis, was due.

1. CLIENT DETAILS

Policy number	
Illustration reference number (if you have received an illustration)	
Policy type	
Title (such as Mr, Mrs, Dr)	
Last name	
First name(s)	

2. FINANCIAL ADVISER DETAILS

Name				
Firm				
Contact number				
3. NEW ADVISER PAYMENT FREQUENCY				
Monthly Quarterly	Half-yearly Annually			
If you have existing FAR and Adviser Charges payments being taken from your policy, please tell us which one (or both) this new frequency will replace				

FAR payments

Ongoing adviser charges payments

4. NEW PAYMENT DATE (ONGOING ADVISER CHARGES ONLY)

Please confirm the last payment date for your current ongoing adviser charge	/ / / OR with immediat	te effect
Please confirm the start date of your new instruction	/ / / / (please only choose a date	between 1st and 28th)

5. DECLARATION

- This instruction is subject to the Terms & Conditions/Policy provisions or Endorsement of my/our policy.
- I/we authorise Phoenix Life Limited to facilitate the charges through my/our policy as set out in this form.
- Where applicable, my/our financial adviser has explained the implications of this change in adviser payment frequency and I/we agree that it may proceed.
- I/we confirm that I/we have read and understood the Notes on page 1.

(For a Trustee Investment Plan in conjunction with an occupational scheme, this section is to be completed by the trustees/scheme administrator)

Client/Trustee/scheme administrator name (as applicable)	Signature	Date
	×	
Trustee/scheme administrator name	Signature	Date
	×	

6. ADDITIONAL TRUSTEE AUTHORITY

Only required for The Executive Pension or a Trustee Investment Plan in respect of an individual member of a Self-invested Personal Pension scheme.

The Trustee(s)/Authorised signatory must agree to and sign this form, unless authority to set-up or change adviser payments has previously been given to the client.

I/we agree that this change in adviser payment frequency and/or payment day may proceed.

Name	Trustee's Signature	Date
	×	
Name	Trustee's Signature	Date
	×	

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