

Intermediary application form

INTRODUCTION

Please complete the attached application form and return it to us at the address shown below. Please keep the Terms of Business for your records.

CONTACT INFORMATION

If you would like help in completing the intermediary application form, please contact one of the following Agency Departments:

LVPM Products

Stocks and Shares ISA
OEIC investments
Contact number: 0845 113 0273
Fax number: 0845 113 0274
Email lvpm.service@lv.com

Retirement Plans

Pension Plans
Annuity Products
Protected Retirement Plan
Contact number : 0800 783 7533
Fax number : 0870 850 2558
Email: inforce.support@lv.com

Lifetime Mortgage

Equity Release
Contact number : 0800 783 7533
Fax number : 0870 850 2558
Email: inforce.support@lv.com

Protection Products

Life Protection (Life)
Critical Illness Protection (CIC)
Income Protection (IP)
Mortgage & Lifestyle Protection (MLP)
Over 50s Insurance (50+)
Maximum Investment Plan (MAX)
Contact number : 01392 287 375
Fax Number : 01392 287 287
Email: lv.agency@lv.com

Please send your completed application form to:

Agency Department
LV= Pynes Hill House,
Rydon Lane, Exeter EX2 5SP
For Textphone first dial 18001.



We are able to provide literature and communications in the following alternative formats: Braille, large print, audiotape. Should you require this document in any of these formats, please contact us.

INTERMEDIARY APPLICATION FORM

INTERMEDIARY BUSINESS DETAILS

Name: _____ Name of Business: _____

Marketing/Trading name: _____
(As appearing on the FSA register)

Address: _____
_____ Postcode: _____

(the "Intermediary")

Business telephone number(s): _____

Email address: _____

Business fax number(s): _____

Website: _____

FSA registration number: _____

Do you handle client money? Yes No

KEY CONTACT NAMES, TITLES AND QUALIFICATIONS

Name: _____ Job title: _____

Qualifications: _____

Name: _____ Job title: _____

Qualifications: _____

Name: _____ Job title: _____

Qualifications: _____

Have you had any previous registration under the Financial Services and Markets Act 2000 (and/or the legislation that it replaced) withdrawn?

If so, please give details _____

Have you had any intermediary application with another company refused, or cancelled? If so, please give full details: _____

Do you wish to apply for indemnity terms? (n/a for LVPM products) Yes No

If yes, please tick required indemnity term period? 24 Months 48 Months

If you have other branches or members who will write business, please attach full names and contact details. Please tick if a list or disk is enclosed

Please specify by ticking the boxes below the Products this application applies to:

Equity Release Stocks & Shares ISA OEIC Investment Protected Retirement Plan
 Pensions Annuities Protection (Life, CIC, IP, MLP, 50+, MAX)

DECLARATION

To LV=

I/We have read the Terms set out by LV= and I/We agree to be bound by them in our dealings with you.

I/We warrant to LV= that it has appropriate permission to carry out Business and that our Appointed Representatives (if any) have been appointed under a contract in compliance with Financial Services and Markets Act 2000.

By signing this Application Form, I/We consent in particular (but without limitation) to the Disclosure and Exchange of information provisions contained in Part 5 of the Terms.

I/We declare that the answers given on this application form are true and complete, and that I/We have not withheld or concealed any circumstances on which information is required.

Signed: _____

Date: _____

Name in BLOCK CAPITALS: _____

Position in firm: _____

(A director or company secretary must sign on behalf of the company, and a partner in the case of a partnership)

COMMISSION PAYMENT DETAILS – FOR DIRECT CREDIT (BACS)

Name of Agency: _____

Agency number (if known): _____

Name of Bank: _____

Bank address: _____

Postcode: _____

Sort code:

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Account number:

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Name of the account: _____

(if different from the name of the Agency)

Signature: _____

Position: _____

Date: _____

SCHEDULE OF PRODUCTS AND COMMISSION TERMS

The schedule will form the basis upon which we conduct business and show you clearly the products for which you have an agency and the commission levels that you will receive.

LV= is a trade mark of Liverpool Victoria Friendly Society Limited and a trading style of the Liverpool Victoria group of companies

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