

THE CHURCH OF ENGLAND PENSIONS BOARD

29 Great Smith Street, Westminster, London, SW1P 3PS

CONFIDENTIAL

Personal Information Form

PLEASE COMPLETE IN BLOCK CAPITALS

Customer Reference:

A. Personal details

1st applicant

Surname:

Title:

Christian name(s):

Date of birth:

Marital status

Married / Civil Partnership / Single / Widowed / Separated /
Divorced

Dependants

Yes

No

Ages:

Comments:

2nd applicant

Surname:

Title:

Christian name(s):

Date of birth:

Marital status

Married / Civil Partnership / Single / Widowed / Separated /
Divorced

Dependants

Yes

No

Ages:

Comments:

B. Present address

	1 st applicant	2 nd applicant
Full postal address:		

Postal code:

Postal code:

Tel number:

Tel number:

E-mail address:

E-mail address:

How do wish to correspond in future with regard to this application / enquiry?
Post / Telephone / E-mail / Fax

C. Income/capital details

	1 st applicant	2 nd applicant
Can you please confirm that you are engaged in the stipendiary ministry and can expect to receive a pension from the Board in retirement (if not already retired / in receipt of pension)?	Yes / No	Yes / No

Please give your National Insurance Number

Have you a specific retirement date in mind (if not retired / in receipt of pension)?

Date:

Date:

Comments:

Can you provide me with an estimate of your income and capital in retirement (including all investments, endowments and lump sum payments)?

Yes / No

Yes / No

What is your annual income from Stipend (before tax)?

£

£

What is your income from Church pension (if already retired)?	£	£
What is current basic annual income before tax (non-clergy only)?	£	£
Do you have any other income?	Yes / No	Yes / No
Bank	£	£
Building Society	£	£
Stocks and Shares	£	£
Unit Trusts	£	£
Total income:	£	£

C. Income/capital details (continued)

	1 st applicant	2 nd applicant
What capital do you have?		
Bank	£	£
Building Society	£	£
Stocks and Shares	£	£
Unit Trusts	£	£
ISA's	£	£
Lump sum from Church pension	£	£
Total capital value of investments:	£	£

Please note that the Board will need to see proof of all income and capital. For example, copies of bank and building society statements, share certificates, bonds and anything else which relates to any other capital or savings, **need to be enclosed with this application.**

Have you thought about how you would make payments for your property if you were to lose your income, or if illness prevents you from working? Yes / No

Comments:

D. Outgoings and commitments

Credit/store cards

App.1 / 2 or joint	Company	Start date (mm / yy)	Current amount owing £	Payment per month £	Repay on completion Yes / No
			£	£	Yes / No
			£	£	Yes / No
			£	£	Yes / No
			£	£	Yes / No

Personal loans/credit agreements

App.1 / 2 or joint	Payment per month £	Amount owing £	Start date (mm / yy)	End date (mm / yy)	Lender	Repay on completion Yes / No
	£	£				Yes / No
	£	£				Yes / No
	£	£				Yes / No
	£	£				Yes / No

Comments:

E. Existing ownership of a Property

Do you already own a property (if so it must be sold on or before completion of the Shared ownership purchase)? Yes / No

F. Occupying the Property

Will you occupy the property immediately on completion of the purchase? Yes / No

'If 'No' is it your intention to let the property? Yes / No

HM Revenue & Customs may consider that this incurs tax charges: have you considered the implications of this? Yes / No

Comments:

Do you have any plans to increase your share of the property in the foreseeable future? Yes / No

If 'Yes' what are your future plans?

Details:

Is there a likelihood that you may need to raise further monies to provide major improvements to your home or move home in the foreseeable future? Yes / No

If 'Yes' what are your future plans? **Details:**

Do you have any particular circumstances or requirements you wish us to take account of? Yes / No

If 'Yes' what are they? **Details:**

Comments:

G. The Property

What types of property are you interested in buying? House / Bungalow / Flat / Maisonette

What is your preferred area? **Details:**

Address of property (if already chosen)

Postal code:
Is the property: Detached Semi-detached Terraced Other

Number of bedrooms: Approximate internal floor area:

Is the property: Freehold Leasehold If Leasehold, what is the unexpired term of the lease?

What amount of capital do you expect to invest in your share of the property?
Purchase price: £ Your Capital Contribution £

I / We agree that the information contained in this Personal Information Form is [a true record of my / our discussions with you] [true to the best of my / our knowledge].

I / We further verify that if any of this information changes we will immediately notify the CEPB , as any changes to the information supplied could affect my / our agreement.

I / We agree that the CEPB entitled to seek references from banks, building societies etc in order to confirm that the information given above is correct.

Signatures

Applicant 1:

Applicant 2:

Date:

Created By: AM/MG	April 2009	Approved By: LM
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