

Please complete this application and send it, together with details of those to be covered to  
The Exeter, Jewry House, Jewry Street, Winchester, Hampshire, SO23 8RZ

▶ **1. Company details**

Company name \_\_\_\_\_ Type of business \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

▶ **2. Registered address (if different from business address)**

Registered address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

Companies House registration number (if applicable) \_\_\_\_\_

▶ **3. Main contact details**

Name \_\_\_\_\_ Position \_\_\_\_\_

Direct line \_\_\_\_\_ Fax No. \_\_\_\_\_ Email \_\_\_\_\_

Intermediary address \_\_\_\_\_

Postcode \_\_\_\_\_ Intermediary FCA No. \_\_\_\_\_

▶ **4. How many individuals are to be covered under the plan?**

**Note: the plan must cover at least five employees**

Employees (5 minimum) \_\_\_\_\_ Partners \_\_\_\_\_ Children \_\_\_\_\_

On a separate spreadsheet please supply the title, first name, surname, sex, date of birth and address of all your employees covered on the plan in the format requested, along with the choice of cover level for each employee. We will also need to have the same information for any partners and children covered on the plan. If there are any children covered on the plan, they will share the annual benefit of an adult plan holder, therefore we will need to know the name of the adult whose benefits they will share. You can download the spreadsheet from [www.the-exeter.com](http://www.the-exeter.com) and submit it by email to [cashplan@the-exeter.com](mailto:cashplan@the-exeter.com).

▶ **5. Choice of cover**

Payments will be taken each month as agreed, and your employees will be covered from the date shown on their plan documentation.

If all of your employees are to be covered under the same level, please tick the relevant box below.

Otherwise, leave these boxes blank and use the employee spreadsheet to specify the cover levels for each employee.

Level 1  Level 2  Level 3  Level 4  Level 5  Level 6  Level 7

Please choose when you would like your cover to start  
(the plan will always start on the first of the month) 01 / MM / YYYY

## ▶ 6. Data Protection and confidentiality

For information on how we use and safeguard your personal information, please refer to our Privacy Policy.

To find out more, go to our website <https://www.the-exeter.com/privacypolicy.html> or contact us and we will send you a copy.

## ▶ 7. Declaration

**'The plan summary' contains our terms and conditions upon which we intend to rely. For your own benefit and protection you should read them carefully before signing. If you do not understand any point please ask for further information.**

**As employer I would like to apply for a one fund plan for my employees (plus partners and children where applicable) and declare that:**

- I understand that The Exeter may use and disclose plan holder(s) information to provide their services, to administer the plan including underwriting, claims processing, assessment and analysis, to improve services and to protect The Exeter's interests.
- I understand that The Exeter may share customer information, including medical information, in strict confidence, with other persons who provide a relevant service to The Exeter, or act as agents.
- I will be responsible for making sure premiums are paid in full and for informing The Exeter of any change of details for those covered.
- I understand the importance of the section on data protection and confidentiality.
- I understand that The Exeter will contact a plan holder's GP and/or any medical treatment provider to process any claims he/she makes. We will seek the plan holder's consent to do so.
- I agree that to the best of my knowledge and belief the information provided is true and complete and I will let you know of any changes to this information, in writing.
- I confirm that if this application has been completed by someone else, it was done so at my request.
- I understand that if I fail to provide any relevant information The Exeter may cancel the plan.
- I understand that the One Fund plan will begin from the date shown on your employee's plan documentation.

Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## ▶ 8. Instruction to your bank or building society to pay by Direct Debit

To be completed by an authorised signatory for your company's bank account.

Please fill in the whole form using a ballpoint pen and send to: The Exeter, Jewry House, Jewry Street, Winchester, Hampshire, SO23 8RZ

Name and full postal address of your bank or building society

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_

Name(s) of account holder(s) \_\_\_\_\_

Bank/building society account number

□ □ □ □ □ □ □ □

Branch sort code

□ □ □ □ □ □

Service User No.

444237

Reference number – for office use only

For The Exeter official use only. This is not part of the instruction to your bank or building society

\_\_\_\_\_

Banks and building societies may not accept Direct Debit Instructions for some types of account.

Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### Instruction to your bank or building society.

Please pay Wessex Administration Services Ltd Re The Exeter Cash Plan Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Wessex Administration Services Ltd Re The Exeter Cash Plan and, if so, details will be passed electronically to my bank/building society.

This guarantee should be detached and retained by the payer



## ▶ The Direct Debit Guarantee

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.

If there are any changes to the amount, date or frequency of your Direct Debit Wessex Administration Services Ltd Re The Exeter Cash Plan will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Wessex Administration Services Ltd Re The Exeter Cash Plan to collect a payment, confirmation of the amount and date will be given to you at the time of the request.

If an error is made in the payment of your Direct Debit, by Wessex Administration Services Ltd Re The Exeter Cash Plan or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society. If you receive a refund you are not entitled to, you must pay it back when Wessex Administration Services Ltd Re The Exeter Cash Plan asks you to.

You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

## Contact us

The Exeter, Jewry House, Jewry Street, Winchester, Hampshire, SO23 8RZ

### Customers

0300 123 3256

cashplan@the-exeter.com

### Financial Advisers

0300 123 3257

cashplan.adviser@the-exeter.com

[www.the-exeter.com](http://www.the-exeter.com)

Calls may be recorded and monitored.

The Exeter is a trading name of The Exeter Cash Plan, which is authorised by the Prudential Regulatory Authority and regulated by the Financial Conduct Authority and the Prudential Regulatory Authority (Financial Services Register No. 202311). Registered in England, Company No. 00515058 with its registered office at Lakeside House, Emperor Way, Exeter EX1 3FD.