

Rate review form for Voluntary policies

Principal employer's name

Policy number

Your **annual renewal date** is approaching and we need up-to-date information about your voluntary **plan**. We'll use these details to work out the new **premium rates** to apply from the next **annual renewal date**.

You'll need to give us this information at least four months before the **annual renewal date**. We can then give you plenty of notice of any **premium rate** changes.

Our form only asks for information about employees who have chosen cover under the **plan**. If the **policy** includes an option to cover employees' partners, you don't need to give their partners' details on this form.

You'll find explanations of the technical terms we use in the glossary at the end of this form. Where terms covered in the glossary appear in the main text, we've highlighted them in bold, **like this**.

Please read and complete this form and return it to us. If you need more space, use extra sheets.

To help protect the membership information you send us you may wish to consider applying security measures, such as password encryption.

Please continue to send us your monthly membership spreadsheet for the accounts as normal.

You don't have to complete and return this form if you already include all the details we're asking for in your monthly membership spreadsheet.

1. Work locations

Please give a breakdown of the number of employees who have chosen plan cover at each of your business locations.

Number of employees who have chosen plan cover

UK postcode or Country, if overseas

Number of employees who have chosen plan cover	UK postcode or Country, if overseas

2. Employee occupations

Please give the number of employees who have chosen **plan** cover in each of the occupational categories.

Occupation	Number of employees who have chosen plan cover	Occupation	Number of employees who have chosen plan cover
Director	<input type="text"/>	Qualified technical ¹	<input type="text"/>
White collar managerial	<input type="text"/>	Skilled manual	<input type="text"/>
Clerical or administrative	<input type="text"/>	Unskilled manual	<input type="text"/>
Foreman or supervisor	<input type="text"/>	HGV driver	<input type="text"/>
Sales	<input type="text"/>	Hazardous ²	<input type="text"/>

¹ Qualified technical means an occupation such as a surveyor or engineer, needing post A-level qualifications or significant experience.

² Hazardous means an occupation where employees expose themselves to a recognisable, but unavoidable, risk of injury.

3. Plan take up

The total number of employees who have chosen cover under the **policy**.

The total number of employees eligible to choose cover under the **policy**.

4. A reminder

Information accuracy

You need to make sure all the information you give us is complete and correct. You must also make sure the monthly membership information you give us is in line with the eligibility conditions and benefit basis we insure. We may not pay benefit if it isn't. For example, we will not pay a claim for an individual who isn't on the membership spreadsheet, or who you include for a benefit we haven't agreed to insure.

Participating employers

You need to tell us if you want to add or remove an employer under the **policy**. We can consider these changes from the day you tell us, or a future date. We may set new terms and change the **premium rates** we charge you.

For voluntary critical illness cover policies

You need to tell your employees about the pre-existing and related conditions exclusions that apply to cover. We've included full details of these exclusions in the **policy**. If needed, we can give you an electronic copy of an employee leaflet summarising the cover.

For voluntary life assurance policies

A Voluntary Life Assurance application needs to be completed to consider a new person's cover or increased cover for an insured person.

5. Data protection and disclosures

Data protection

Use of your information: Legal & General takes your privacy very seriously. We use the personal information collected by this form and any other information we're provided with, for the purposes of:

- Carrying out our responsibilities under any policy or agreement you enter into with us, and to provide information, products and services you request.
- To tell you about changes to our services and products.
- To comply with any applicable legal or regulatory requirements.
- For carrying out market research, statistical analysis and customer profiling to help us to improve our processes, products and services.
- To define our actuarial, pricing and underwriting strategies.
- To run our business in an efficient and proper way.
- For any other purpose that we've agreed with you from time to time.

The information that we collect from you may be transferred to, and stored at, a destination outside the European Economic Area ("EEA") to third-party suppliers, delegates or agents. We'll take all reasonably necessary steps to make sure that the data is treated securely and in accordance with our privacy policy. We'll only transfer the data to a recipient outside the EEA where we're permitted to do so by law.

You will need to send us personal information about your employees who are, or become, eligible for cover. This may include medical and health information. You need to satisfy yourself of a legal basis that allows you to send us these details, or consider seeking appropriate consent (explicit consent in the case of medical or health information).

[Our full Privacy Policy is available at legalandgeneral.com/privacy-policy/](https://www.legalandgeneral.com/privacy-policy/). Please share this with your employees so they understand what we do with the information we collect.

Disclosures

We'll disclose when necessary, your information to other companies within the Legal & General group of companies, your financial adviser, our professional advisers, reinsurers, regulatory bodies, government, law enforcement and fraud prevention agencies, future owners of our business, and the third-party suppliers, contractors and service providers we engage to help us provide our services to you.

If you make a claim, we will share information, where necessary, with other insurance companies to prevent fraudulent claims.

We may check details with fraud prevention agencies. If false or inaccurate information is provided and fraud is identified, details may be passed to fraud prevention agencies. Legal & General, law enforcement agencies and other organisations may access and use this information and information from other countries, to prevent fraud and money laundering.

You can contact us at: Group Financial Crime, Legal & General, Knox Court, 10 Fitzalan Place, Cardiff CF24 0TL if you want to receive details of the relevant fraud prevention agencies.

6. Declaration

I will share Legal & General's [Privacy Policy](#) with my employees.
I declare the information given on this form is complete and correct.

Signature or type name

X

Date (DD/MM/YYYY)

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Name (BLOCK CAPITALS)

Position

7. Glossary

Annual renewal date means the anniversary of the start of the **policy** or another date we've agreed with you.

Plan means the plan you've set up to pay the benefits promised to your employees.

Policy means the legal contract between you and us. It describes who is covered and the benefits we insure. We send this to you when cover starts, and each time we update the policy.

Premium rates means the rates used to work out the cost of each person's cover.

Contact us

0345 072 0751 Monday to Friday 9am to 5pm.
We may record and monitor calls. Call charges will vary.
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legalandgeneral.com/workplacebenefits

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