# **Employee Life Insurance**

Requirements to establish a Policy

This document includes 3 sections, all of which must be completed and returned to Canada Life before we will be able to assume risk for an Employee Life Insurance Policy.

- Proposal Form
- Master Trust Deed of Participation
- Direct Debit Mandate

### Important information

- All sections must be completed and signed by someone authorised by the employer who wishes to take out the insurance Policy
- Information regarding your legal rights is included at the end of this document
- We cannot accept this form if all the signatures required have not been provided:
  - Employer Declaration, page 4.
  - Deed of Participation, one set of signatures only from the options on page 9, 10 and 11
  - Direct Debit Mandate, page 13
- E-Signatures should be used in the Employer Declaration and Direct Debit Mandate sections however, they cannot be used in the Deed of Participation section if you are completing as a:
  - Partnership,
  - Sole Trader,
  - any other entity which requires the deed to be witnessed.
- We must receive your completed form by 4pm to assume risk for the following working day.

### How to return vour form

### By email

eli@canadalife.co.uk



Scanned or photographed images of the completed form can be emailed to start the process.

### By post



**ELI Customer Services**, Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.

### Call us

Canada Life 0345 223 8000 Fulcrum 0845 872 9400

If you have any questions regarding the completion of this form or the submission process, please call us.



Fulcrum insured employee benefits



# **Employee Life Insurance**

### **Proposal Form**

This form should be completed by someone authorised **by the employer participating in the Master Trust**, shown on the next page, to confirm that Canada Life should assume risk for a Group Life Assurance Policy.

### Statement of suitability

Please contact Fulcrum if you are unable to answer Yes to all questions.

1	We do not currently insure our employees for life insurance.	Yes
2	Everyone to be covered receives all or part of their earnings via PAYE.	Yes
3	Everyone to be covered is resident in the UK and not currently seconded abroad.	Yes
4	No one to be covered undertakes any of the following as part of their job.	Yes
	Working at heights above 10 metres	
	Working offshore, underground or underwater	
	• Work with explosives, weapons or firearms	
	Working as part of an air or ship crew	
5	Business travel undertaken is within Canada Life's scheduled territories.	Yes
6	To the best of my knowledge, I am not aware that anyone to be covered has suffered from a serious illness <b>within the last 12 months.</b>	Yes

Please note that confirmation of cover is subject to Canada Life being able to accept the total benefit required at the Postcode provided.

### **Canada Life Scheduled Territories**

a The United Kingdom, all European Union (EU) countries, Andorra, Australia, Canada, the Channel Islands, Gibraltar, Hong Kong, Iceland, the Isle of Man, Liechtenstein, Monaco, New Zealand, Norway, San Marino, Switzerland, USA and the Vatican City.

### Serious Illness definition

**b** For the purposes of ELI, we define someone with a serious illness as having suffered or is currently suffering from one of the following illnesses or experiences.

- Cancer
- Heart Attack
- Stroke
- Terminal Illness where death is expected within 12 months and the diagnosis has been made by an attending consultant.

### **Completion notes**

We cannot accept this form if all signatures required have not been provided.

# How to return your form \_\_\_\_\_

### By email

eli@canadalife.co.uk



Scanned or photographed images of the completed form can be emailed to start the process.

#### By post



ELI Customer Services, Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.

#### Call us

**Canada Life** 0345 223 8000 **Fulcrum** 0845 872 9400

If you have any questions regarding the completion of this form or the submission process, please call us.

## **Employee Life Insurance** Proposal Form

2 Employer'	's details		
Employer's Registered N	Name		Registered Company Number
Workplace address			
			Postcode
Telephone number		Email Address	
Associated Employer's I	Name (if applicable)		Associated Employer's Registered Company Number
3 Basis of ri	sk		
Monthly cost per employee	Benefit	Please tick one option only	Number of lives (2-99 lives)
£9.00	£50,000		Select your commencement date (day, month, year)
£18.00	£100,000		<b>Payment frequency</b> Monthly by Direct Debit
£27.00	£150,000		Eligibility All PAYE Employees
£36.00	£200,000		<b>Cease age</b> The employee's State Pension Age (any employee who exceeds the cease age should be excluded from any calculations and will not be covered)
4 Absence of	check		

- All employees will be covered from the commencement date if they were **at work** on the working day **before** the selected commencement date. Employees who are on statutory leave are still classed as being '**at work**'. Statutory leave for these purposes means adoption leave, jury service, maternity leave, parental bereavement leave, paternity leave, or shared parental leave.
- Those not covered at the start of the policy will automatically be covered when they have returned to work for 5 consecutive working days.
- Please note premiums will be charged for these members even whilst not covered.
- Anyone who is absent at the start of the policy and is not expected to return, can and should be excluded from the policy.

### **Employee Life Insurance** Proposal Form

Fulcrum insured employee benefits



### Data Protection Statement

## Canada Life Limited takes its privacy obligations very seriously.

Any personal data provided to us, as data controller, by a policyholder, joint policyholder, employer policyholder, trustee, insured person, professional adviser, beneficiary, next of kin, personal representative, executor claimant, or member will be treated in accordance with the Data Protection Act.

For employer-related group insurance products the Data Protection Act permits appropriate information about employees to be provided by an employer to an insurer without individual consent (including details of long term absentees, current and previous claimants, and medical underwriting decisions).

We use personal data to undertake activities relating to the setting up, administration and renewal of our policies, products and services. This includes processing applications and handling any claims. For the majority of our business we will rely on the performance of our contractual arrangements with you as the legal basis for processing.

We do not use personal data for marketing purposes.

Please see the Data Protection Notice overleaf for full details.

### **Next steps**

Please refer to the 'How to return your form' section on page 1.



**Note:** We must receive your completed form by 4pm to assume risk for the following working day.

### **Employer Declaration**

This proposal must be signed by an authorised official(s) on behalf of the participating employer. Space is provided for an additional signatory, to be used if the participating employer requires a second signature in accordance with their normal practice.

By signing the declaration below, you confirm that you agree to us using, processing and sharing the personal data (including special categories of personal data) provided to us for the purposes set out in the Data Protection Statement and Data Protection Notice shown overleaf.

We confirm that we, the employer, wish to participate in the Canada Life Group Master Trust, and request Canada Life to issue to us an Employee Life Insurance Policy. We agree that this proposal and any statements or declarations made by us, or any company or organisation included (if any) or by the lives to be covered or members of the Policy to Canada Life or Canada Life's medical examiners form the basis of the contract. We confirm that we are able to effect this cover.

## By signing this form we are allowing Canada Life to process this application using the information we have provided.

Print full name		
Job title		
Date (day, month, year)		
Signature 2		
Print full name		
Job title		

Canada Life Limited, registered in England no. 973271. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. CLFIS (UK) Limited, registered in England no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Canada Life and design are trademarks of The Canada Life Assurance Company.

## **Employee Life Insurance** Data Protection Notice

You may interact with Canada Life Limited (referred to as 'Canada Life', 'we', 'us' or 'our' in this DPN) in any one (or more) of the following capacities: as data controller, a policyholder, joint policyholder, employer policyholder, trustee, insured person, professional adviser, beneficiary, next of kin, personal representative, executor claimant, or member. No matter which capacity you interact with Canada Life, you will be referred to as 'you' or 'your' in this DPN. Any personal data about yourself (provided by you or about you by another party) or which you provide about someone else will be treated in accordance with the applicable laws and regulations in any relevant jurisdiction relating to privacy or the use or processing of personal data; Canada Life takes its privacy obligations very seriously

By signing this form you consent to Canada Life using and sharing your personal data as set out in this notice including, without limitation, the processing of special category personal data.

If submitting personal data about another person, by signing this form you confirm that you have their consent to provide such information to Canada Life and for their information to be used as set out in this notice.

#### Using Personal data

We use personal data to undertake activities relating to the setting up, administration and renewal of our policies, products and services. This includes processing applications and handling any claims. For the majority of our business we will rely on the performance of our contractual arrangements with you as the legal basis for processing.

We do not use personal data for marketing purposes and we do not make your personal data available to third parties for the purpose of direct marketing.

The nature of our business is to provide investments, life and pensions cover, critical illness, income protection and employer-related group products. To do this we need to use the personal data provided to carry out analysis of actuarial risks (risks of gains or losses), mortality and morbidity risks and pricing. This will be carried out in accordance with the Institute & Faculty of Actuaries' data handling protocols.

We use underwriting software to process some applications and quotations which will use an element of automated decision making.

Exceptionally, we may rely on our legitimate interests to process your personal data. When we do, we will demonstrate compelling legitimate grounds for doing so.

We rely on legitimate interest to process your personal data for statistical analysis, which helps us to improve our processes, products and services. The purpose of this statistical analysis is not to make decisions about you directly, but to undertake data analysis to help us to improve our processes, our products and services. Additionally, we will process your personal data to undertake market research, including customer feedback surveys. To maximise the security of your information, we pseudonymise your personal information where possible. This means removing information from which you can be directly identified.

For employer-related group insurance products the DPA permits appropriate information about employees to be provided by an employer to an insurer without individual consent (including details of long-term absentees, current and previous claimants, and medical underwriting decisions).

For employer-related group products the DPA permits that members may individually withdraw their consent, In those instances Canada Life will be unable to provide cover for that individual.

When medically underwriting or assessing a claim we will obtain consent from the employee.

#### Sharing personal data

We share personal data only on the basis of the purposes for which it was collected. This notice is intended to illustrate the instances where data may be shared. However, we will share your data only for the limited and compatible purposes for which it was originally obtained:

- with other Canada Life group companies including those outside the European Economic Area (EEA);
- with any of our service providers, reinsurers and / or regulators;
- with other insurers and government agencies, including without limitation Her Majesty's Revenue and Customs (HMRC), Department of Work and Pensions (DWP);
- in order to prevent, detect or investigate financial crime including fraud or other criminal activity, we may share your data with other companies (including private investigators), organisations (including fraud prevention agencies and databases), public bodies (including the police) and associations and credit reference agencies;
- we will not share your medical information with anyone other than yourself without your consent except as described in the next bullet point. This includes your employer, spouse, other relatives, friends or your legal or professional adviser. In some circumstances, it may be appropriate to advise your employer about your medical information, for example, to recommend alternative supportive therapy. However, we will seek your consent in such circumstances;
- for employer-related products and services only, some medical information related to underwriting decisions and non-medical information about you necessary for lawful policy and claim administration purposes will be shared with your employer;
- we will not share non-medical information concerning you with your spouse, other relatives, friends or your legal or professional adviser unless you provide your consent to us in writing;
- for insurance related products, with your own doctor or relevant medical professionals;
- with selected third-party suppliers for the purposes of statistical analysis to help us improve our products, services and processes;
- with selected third-party research agencies and providers of market research services, including customer feedback surveys; and/or
- in any circumstances if permitted or required to do so by law or if we have your consent to do so.

#### **International Transfers**

Given the global nature of our business, we use third party suppliers and outsourced services (including cloud-based services), which can require transfers of personal data outside of the EEA and countries that have an EU adequacy decision. In doing so, we ensure there are contractual arrangements in place with those organisations who have organisational and technical measures to protect your personal data.

#### Retention of your personal data

We will keep your personal data only for so long as is necessary and for the purpose for which it was originally collected. In particular, for so long as there is any possibility that either you or we may wish to bring a legal claim under this insurance, or where we are required to keep your personal data due to legal or regulatory reasons.

## **Employee Life Insurance** Data Protection Notice

#### Post Brexit - UK departure from the European Union

On 31 January 2020 the UK left the European Union ('EU'), ceasing to be a member. EU law requires that all entities processing the data of EU citizens that are not established in the EU designate in writing a Representative in the EU to be addressed in addition to or instead of that entity by EU citizens on all issues related to data processing. In order to meet our requirements, each Canada Life entity listed above which processes the personal data of EU citizens has designated Canada Life Irish Holding Company Limited, an Irish registered entity within the Canada Life group, as its Representative. The Representative may also be called upon to cooperate with competent supervisory authorities with regard to ensuring compliance with the General Data Protection Regulation ('GDPR').

Contractual clauses in place between Canada Life and its group entities and external suppliers are compliant with the GDPR, which ensures that personal data provided to Canada Life is processed in accordance with our instructions and the requirements of the GDPR. Canada Life will continue to follow and apply all appropriate data protection legislation including that provided by the UK Government and the Information Commissioner's Office (ICO) with regards to data protection.

## YOUR RIGHTS AND CONTACT DETAILS OF THE INFORMATION COMMISSIONER'S OFFICE (ICO)

You may have the right to require us to:

- provide you with further details on the use we make of your personal data or your special categories of data;
- provide you with a copy of the personal data that you have provided to us or which we hold;
- update any inaccuracies in the personal data we hold;
- delete any special category of data or personal data for which we no longer have lawful grounds to use;
- cease processing of your personal data that is based on consent, by withdrawing your consent to that particular processing;
- cease any processing based on legitimate interests grounds, unless our reasons for undertaking that processing outweigh any prejudice to your data protection rights; and
- restrict how we use your personal data whilst a complaint is being investigated.

In certain circumstances, we may need to restrict the rights listed above in order to safeguard the public interest (e.g. the prevention or detection of crime), our interests (e.g. the maintenance of our legal responsibilities) and for the performance of our contract with an employer who is the policyholder for employer-related products and services.

#### Data Protection Officer (DPO)

If you have any questions, or complaints, in relation to our use of your personal data, you should first contact our DPO, on the details below:

Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA

or by email at: dpo@canadalife.co.uk.

In the unlikely event that you are dissatisfied with our response, you have the right to take the matter up with the Information Commissioner's Office (ICO), whose address is:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF

The full version of our DPN can be found on our website, www.canadalife. co.uk or is available upon request by calling 0345 223 8000.

This DPN is dated 31st March 2022. Any future updates will be made available as described above.

# **Canada Life Group Life Master Trust**

**Deed of Participation** 

### To join the Master Trust to hold registered group life policies

### This document should only be completed, if

- You wish the benefits insured under a Registered Group Life Policy to operate under the rules of the Canada Life Group Life Master Trust, and
- The organisation is able to participate in the Canada Life Group Life Master Trust, and
- The Canada Life Group Life Master Trust satisfies your requirements



### Deed of Participation for the Canada Life Group Life Master Trust

THIS	DEED is made on	Date
BY:		
(1)	Participating Employer	
	Company Registered Number (if applicable)	
	Address	
		(the " <b>Employer</b> ");

### WHEREAS:-

- (A) By a trust deed dated 27th January 2015 made between (1) the Sponsor and (2) the Trustee (the "Trust Deed") a trust was established as a Registered Scheme for the purpose of payment of lump sum benefits on death in respect of any Member (as those terms are defined in the Trust Deed) (the "Plan").
- (B) The Employer wishes to become a Participating Employer in the Plan as defined in clause 1 of the Trust Deed.
- (C) Under clause 9 of the Trust Deed the Sponsor may admit any company or firm to participate in the Plan as a Participating Employer provided that they are covered by a Policy (as defined in the Trust Deed) and all other companies, firms or persons covered by the Policy also participate in the Plan.

### IT IS AGREED as follows:-

- 1. The Employer agrees to participate in the Plan as a Participating Employer and to pay the amount requested by the Trustee as the premium or premiums for the Trustee to apply in the purchase of a Policy or Policies. The Employer confirms that all other companies, firms or persons covered by the Policy (if any) will participate in the Plan.
- 2. The Employer further agrees and declares that it will at all times and in all respects be bound by and comply with the terms and conditions of the Plan as set out in the Trust Deed.
- 3. The Employer undertakes to indemnify and at all times to keep the Sponsor and the Trustee and each of them respectively indemnified against all actions, proceedings, claims and demands brought or made against the Sponsor and/or the Trustee and all losses, damages, liabilities, costs and expenses incurred or sustained by the Sponsor and/or the Trustee as a result of or in connection with any breach by the Employer of any of its obligations under this Deed.
- 4. This Deed shall be read as one with the provisions of the Trust Deed and shall be governed and construed in accordance with the laws of England and Wales.

Complete **one** of the following only

1 Where the Employer is a limited company or PLC:		
Executed as a deed on behalf of the Participating Employer by the following authorised signatories		
Signature of Director of Limited Company or PLC	Signature of Director of Limited Company or PLC / Company Secretary	
Full name in block capitals	Full name in block capitals	

### 2 Where the Employer is an LLP:

Executed as a deed on behalf of the Participating Employer by the following authorised signatories

Signature of Member of LLP	Signature of Member of LLP
Full name in block capitals	Full name in block capitals

3 Where the Employer is a Partnership:		
Executed as a deed on behalf of the Participating Employer by the following authorised signatories		
Signature of Partner 1	Signature of witness	
Full name in block capitals	Full name in block capitals	
Signature of Partner 2 (if applicable)		
	Address of witness	
Full name in block capitals	Occupation of witness	

### Where the Employer is a sole trader

4

Executed as a deed on behalf of the Participating Employer by the following authorised signatories		
Signature of Sole Trader	Signature of witness	
Full name in block capitals	Full name in block capitals	Address of witness Occupation of witness

### 5 Where the Employer is an incorporated charity:

Executed as a deed on behalf of the Participating Employer by the following authorised signatories

Signature Charity Trustee	Signature Charity Trustee
Full name in block capitals	Full name in block capitals

### 6

For any other type of entity not referred to above – continued

(You must ensure that you have used a legally valid execution option. Failure to do so may invalidate your participation in the Master Trust)

### Executed as a deed on behalf of the Participating Employer by the following authorised signatories

Authorised Signatory	
Full name in block capitals	
Signature of witness	
Full name in block capitals	
Address of witness	
Occupation of witness	Company seal (where required)
Authorised Signatory (where required)	Authorised Signatory (where required)
Full name in block capitals	Full name in block capitals
Signature of witness	Signature of witness
Full name in block capitals	Full name in block capitals
Address of witness	Address of witness
Occupation of witness	Occupation of witness

## Master Trust

**Deed of Participation** 



Canada Life Limited, registered in England no. 973271. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. CLFIS (UK) Limited, registered in England no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Canada Life and design are trademarks of The Canada Life Assurance Company. GRP1189 – 1220R(A)





Please fill in the whole form using a ball point pen and send it to: Customer Services – Workplace Protection, Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.

Name and full postal address of your bank or building society

To: The Manager	
Postco	ode

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

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

Service User Number



Reference

#### Instruction to your bank or building society

Please pay **Canada Life Limited** 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 **Canada Life Limited** and, if so, details will be passed electronically to my bank/ building society.

Signature(s)

Date

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

### \*

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 Canada Life Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Canada Life Limited 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 Canada Life Limited 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 Canada Life Limited 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.

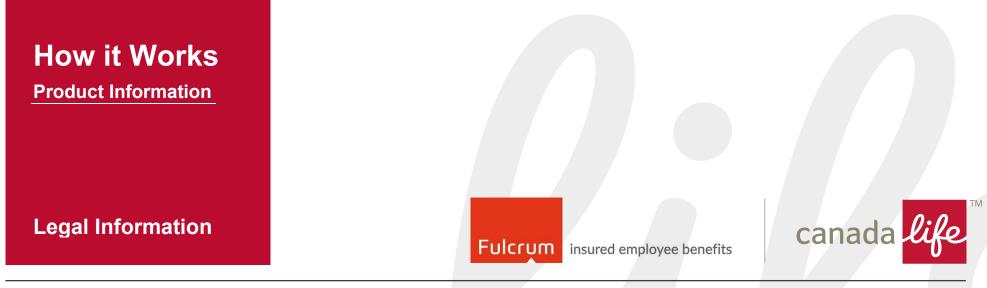
Canada Life Limited, registered in England no. 973271 Registered office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. CLFIS (UK) Limited, registered in England no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Canada Life and design are trademarks of The Canada Life Assurance Company.

GRP87 - 720R(B)

# **Employee Life Insurance**

Legal Information



### What we do

Canada Life Limited is a company carrying out insurance business (also referred to as an insurance undertaking). We do not provide advice on whether the product meets your particular requirements.

#### Remuneration

Canada Life may pay some of our staff bonus payments which are linked to the number and/or value of the policies which we sell.

### **Financial strength**

If you want to find out about our financial strength, including our solvency margin, you can view our Solvency and Financial Condition Report (SFCR) at www.canadalife.co.uk/adviser/aboutus/solvency-2

### Compensation

If we are unable to meet our liabilities, you may be able to claim compensation from the Financial Services Compensation Scheme.

### **Policy Cancellation**

A cooling off period does not apply to Group Risk products.

### When you can cancel the cover

The policy can be cancelled at any time, but we must be advised in writing before the date you want to cancel the cover. This means:

- the policy will continue until we have received your written instruction
- we will not backdate the request to cancel cover
- we will charge for the time we provide cover

### When we can cancel the cover

We reserve the right to cancel cover if:

- you do not pay the premium requested within 30 days of the date it was due
- you cancel a Direct Debit used to pay premiums
- you do not comply with the terms of the policy
- new legislation or regulations are introduced, or changes are made to existing legislation or regulations
- the policy does not comply with existing legislation
- any employer insured becomes a restricted person

We will always confirm in writing if we intend to cease cover

### Canada Life Master Trust

If the policy is cancelled, then all employers covered by the policy will immediately exit the Master Trust on the date the policy ceases.

## The Canada Life Group Life Master Trust

Our Employee Life Insurance policy is designed to work in conjunction with a discretionary trust. Tax advantages are available because the benefits are provided under Canada Life's Master Trust.

Joining our Master Trust is a quick and simple way of gaining all the tax advantages without taking on the extra work of administering a stand-alone HMRC Registered Group Life scheme. You need to complete a deed of participation, one option only, to be included. Our Master Trust is administered by Trustee Solutions Limited (the trustee).

More details are available here.

### Notes:

Group Life Assurance schemes registered with the government, such as Canada Life's Master Trust, are considered 'new arrangements' so will be used in any calculations when consideration of the Lifetime Allowance is made or an employee's enhanced or fixed protection (or any subsequent version of fixed protection) limits granted.

Including an employee who is affected could cause any protections granted to be lost and could result in additional taxation issues. We recommend discussion with employees who might be affected before including them in your new Group Life scheme.

#### General notes on taxation

The following sets out our understanding of the legislation and HMRC practice on 1st September 2021.

### **Taxation of premium payments**

Premiums paid by the employer are not normally treated as a P11D benefit where the employee is working in the UK and is subject to UK tax. These premiums are normally treated as a business expense.

Tax relief on premiums paid by the employer in respect of someone who has a proprietorial interest in the company or is an equity partner will not normally be available.

### **Taxation of benefits**

Benefits will not form part of the deceased's estate and therefore would not normally be subject to tax.

### Law

The construction, validity and performance of the policy will be governed by English law. If there is any dispute between the parties about anything to do with the policy, the English Courts are the only courts which may make a judgment about the dispute. Any person or company who is not a party to this policy does not and shall not have or acquire any right under the Contracts (Rights of Third Parties) Act 1999 to enforce any term of this policy.

### **Support Services and Perks**

These are provided by Canada Life's services company CLFIS (UK) Limited (CLFIS), through its service provider Teladoc Health. These are noncontractual benefits which are available if you have an Employee Life Insurance policy with us.

The provision of these services does not form part of your insurance contract with us and we provide access to these services as a value added extra. These are complimentary services and can be altered or withdrawn at any time.

### Queries and complaints

If you require any more help, or if you have a complaint about any aspect of the service you have received, please contact:

#### ELI Team

Canada Life Limited Group Insurance, Canada Life Place Potters Bar,

Hertfordshire. EN6 5BA.

Telephone: 0345 223 8000

Email: eli@canadalife.co.uk

Fax: 01707 671180

If we cannot settle a complaint it can be referred to:

The Financial Ombudsman Service, Exchange Tower, London E14 9SR.

Telephone Free:

0800 0234 567 or 0300 123 9123.

#### Email:

complaint.info@financialombudsman.org
.uk

Website

#### www.financial-ombudsman.org.uk

Making a complaint will not prejudice your right to take legal proceedings.

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