

GUINNESS IRELAND GROUP ADDITIONAL VOLUNTARY CONTRIBUTIONS (AVC) PLAN EMPLOYEE APPLICATION FORM

This form should only be used for **NEW** members of the Guinness Ireland Group AVC Plan.
Please complete every item on this form in BLOCK CAPITALS. If any item is blank or illegible, this will cause a delay in processing your application. If you are unsure about any item, you should ask the Diageo Pensions Team.

Section 1: Scheme Details

Scheme Name Scheme Number

Section 2: Your Details

Title Mr Mrs Miss Ms Other

First Name Surname
Please use both the first name and surname in your employee records

Address

Phone Work Mobile

Email

Date of Birth / / Male Female

Relationship Status Married Single Widow(er) Separated Divorced Civil Partner

PPS Number PPS Number should contain 7 digits and 1 or 2 letters. This is required for Revenue approval.

State your normal retirement date under your main plan / /

State your intended early retirement date / /

Section 3: Your Employment and Membership Details

Date employment started / / Date plan membership is to commence / /

Payroll/Staff Number Current Salary € per annum

Precise Occupation

Are you a: 20% director Yes No 5% director Yes No

Section 4: Your Pension Contribution Details

Date contributions are to commence / /

Additional Voluntary Employee Contributions* Regular € . Once-off (per annum) € .

*Note: Employees may qualify for tax relief on their own pension contributions. The percentage of your contributions that you can claim tax relief are shown in the table opposite. This includes any compulsory contributions to your main scheme and Additional Voluntary Contributions. Any contribution in excess of compulsory employee contribution paid by an employee will be treated as Additional Voluntary Contributions.

The maximum earnings limit for tax relief on pension contributions for 2017 is €115,000.

Please refer to your member booklet or our website www.irishlifecorporatebusiness.ie for details on the Standard Fund Threshold allowable for tax relief purposes.

Age	Maximum annual contributions as % of gross salary
<30	15%
30-39	20%
40-49	25%
50-54	30%
55-59	35%
Age 60 & Over	40%

Section 5: Investment Details

Please indicate your chosen investment option for your future contributions by ticking the box at the left hand side of your chosen option. Further information on the fund options is available on www.irishlifecorporatebusiness.ie

You must choose either **Do It For Me** or **Do It Myself**.

Do It For Me **EMPOWER Personal Lifestyle Strategy (PLS)**

This strategy initially invests in the High Risk/Return Growth Strategy and moves funds to the Medium Risk/Return Strategy from 20 years before retirement. From 6 years before your Normal Retirement Age/Chosen Retirement Age your funds move fully to the EMPOWER Cash Fund.

Do It Myself **One or more of the funds listed here**

If you choose this option, you must tell us what percentage you wish to invest in each fund, subject to a maximum of 5 funds. You can invest 100% in one fund or spread it over a number of funds but the total must equal 100%.

	Regular Contributions	Once-Off Contributions
Indexed World Equity Fund (Partially Hedged) (<i>equities</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
High Risk/Return Growth Strategy (<i>mixed assets</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
Medium Risk/Return Growth Strategy (<i>mixed assets</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
Low Risk/Return Growth Strategy (<i>mixed assets</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
Indexed Corporate Bonds Fund (<i>bonds</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
EMPOWER Pension For Life Fund (<i>bonds</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
EMPOWER Cash Fund (<i>cash</i>)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %
Total	1 0 0 . 0 0 %	1 0 0 . 0 0 %

Section 6: Data Protection Notice and Employee Declaration

Data Protection Notices and Consents

- The information you provide to Irish Life Assurance plc will be held on a computer database and/or any other way and will be used to administer this contract/transaction and any other products or services supplied to you and any future agreements, contracts or arrangements you may have with Irish Life Assurance plc.
- You have the right to question the purpose for which your data is held and the right to obtain a copy of your personal data held by Irish Life Assurance plc by submitting a written request and paying a small fee.
- You have the right to request Irish Life Assurance plc to correct any inaccuracies in your personal data.

I declare that I consent to the

- processing and holding (on computer or otherwise) of all information (personal and sensitive) disclosed by me, or on my behalf, in relation to this contract/transaction by Irish Life Assurance plc, its servants and agents (together with such other information supplied to, or obtained by Irish Life Assurance plc separately) for administrative, customer care and service purposes.
- disclosing of my personal data (personal and sensitive) to persons necessary in connection with the above purposes, to regulatory authorities or as required by law, to reinsurers and health professionals and other companies in the Irish Life Group or the Great-West Lifeco Group. This may involve the transfer of personal data, including sensitive personal data, to countries outside the European Economic Area.

Signature Date

Employee Declaration

I declare that the answers to the above questions are in every respect true and complete and that this application and declaration shall form the basis of the contracts with Irish Life Assurance plc. I declare that I have applied for membership to the plan to which this Employee application form relates and that specific conditions shall apply as indicated above. I hereby authorise my employer to make the necessary deductions from my salary or wages for the specific purpose of paying the employee contributions detailed earlier in this form until such time as the employer receives notice in writing from me to the contrary.

Signature Date

Irish Life Assurance plc is regulated by the Central Bank of Ireland.

In the interest of customer service we will monitor calls. Irish Life Assurance plc, Registered in Ireland number 152576, VAT number 9F55923G.

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