

Essex Police Federation Group Insurance Scheme New Recruit Application Form



Applicable to new recruits applying to join the scheme within their first six months of service. Please complete and return the form to:

Essex Police Federation, 82 Springfield Road, Chelmsford, Essex CM2 6JY

You will need to print this form to sign it.

Surname:	<input type="text"/>	Forename(s):	<input type="text"/>
Date of birth:	<input type="text"/>	Date of joining Force:	<input type="text"/>
Collar number:	<input type="text"/>	Telephone:	<input type="text"/>
Address:	<input type="text"/>		
<input type="text"/>		Email:	<input type="text"/>

Membership of the scheme is free for the first 26 weeks of service following which the full premium of £29.97* will be deducted from your salary each month.

By signing this application form, you confirm that you have not been absent from the employer's service on account of ill-health or injury at any time during the eight weeks preceding this application.

I wish to join the group insurance scheme and I hereby authorise the deduction of the monthly premium indicated from my pay. ☐ £29.97* per month inclusive of the Federation's administration fee of £1.56 and Insurance Premium Tax (IPT)

**The premiums payable will be subject to periodic review and may go up or down*

I wish to join the scheme with effect from: (Month and year of commencement)

Signature: Date:

It is important that the information you have provided to us is to the best of your knowledge true, accurate and complete and reflects your current circumstances. If your circumstances change, please inform us. If we or the insurer discover that the details provided to us are untrue, inaccurate or incomplete, this may result in refusal of a claim and/or your policy being cancelled or treated as if it never existed.

Cover is conditional to continued membership of the scheme and ceases at age 70. Some benefits reduce or cease on retirement from the police service and benefits change again at age 65. Please contact the Federation or Gallagher for further information.

Beneficiary details (Please notify the Federation immediately of any changes to your personal or beneficiary details)

Surname:	<input type="text"/>	Forename:	<input type="text"/>
Date of Birth:	<input type="text"/>	Relationship to member:	<input type="text"/>
Address:	<input type="text"/>		
<input type="text"/>			

The maintaining of an up-to-date will is advised. Payments are made by the Trustees under the terms of the 'Trust Deed', which would normally be to the member's chosen beneficiary. The Trustees will, at their own discretion, agree payment in the event of a life claim. I understand that in all matters, in accordance with the Trust Deed, the decision of the Trustees is final.

Officer's payroll number: (For office use only)

Data Privacy Notice

How do we maintain your privacy?

We are the data controller of any personal data you provide to us. We collect and process personal data in order to offer and provide insurance services and policies and to process claims. Personal data is also used for business purposes such as fraud prevention and detection, financial management, to generate risk modelling, conduct analytics including to advise, improve and develop our products and services and to comply with our legal and regulatory obligations. This may involve sharing information with, and obtaining information from, our group companies and third parties such as (re)insurers, other brokers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators or fraud prevention agencies.

We may record telephone calls to help us to monitor and improve the service we provide as well as for regulatory purposes. Please see our Privacy Notice for further information on how your personal data is used, shared, disclosed and retained, your rights in relation to your personal data and how to contact our Data Protection Officer. Our Privacy Notice can be found at <https://www.ajg.com/uk/privacy-policy/>. From time to time we may make important updates to our Privacy Notice and these may in turn affect the way we use and handle your data. Please ensure you review our Privacy Notice periodically to ensure you are aware of any changes.

If you are providing us with personal data of another individual that would be covered under the insurance policy we may be placing or services we may provide to you, you shall ensure that you have obtained all appropriate consents, where required, tell them you are providing their information to us and show them a copy of this notice. You must not share personal data with us that is not necessary for us to offer, provide or administer our services to you.



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