

Membership Application

Thank you for choosing B&CE's employee benefits package.

You can provide the EasyBuild stakeholder pension, accident and life cover to any of your employees (the exception is directors and partners who are not eligible for accident and life cover).

Only operatives "personally engaged" in specified construction operations are eligible for the National Insurance saving on holiday pay. For guidance please see our National Insurance Concession – Eligibility Guideline at www.bandce.co.uk/documents.

Simply complete all of the section below, if you have any question or problems please call 08457 414142 or 01293 586790 and we will be pleased to help you. To help improve our service, we may record your call.

B&CE
Benefit Schemes



Your company details

Contact name: _____ Position: _____

Company name: _____ Address: _____

_____ Postcode: _____

Direct telephone number: _____ Switchboard telephone: _____

Fax number: _____ E-mail address: _____

Limited companies – registered number: _____

Do you belong to any federations? Yes No

If so, please state which: _____

Has your company previously been a member of B&CE? Yes No

Are you associated with a company that is currently a member of B&CE? Yes No

If yes, please complete:

Name of associated company: _____

Nature of relationship: (e.g. Parent company) _____

To satisfy the Money Laundering Regulations, in common with most financial services providers, we may make checks on your identity and address.

Your pension contribution arrangement

The minimum weekly employer contribution is £5. If you employ operatives under the CIJC Working Rule Agreement, you should match operative's contributions up to £10 per week.

Please state what contribution you will match for your employees:

£5 (minimum amount) Up to £10 (CIJC) Other Please specify the amount _____

Varies depending on employee

If you have a matching arrangement we will write to your employees to explain the level of employee contributions you are willing to match. Please contact us if you do not want us to do this.

Your employees' details

Please enter overleaf the details of the employees you would like to include. If you have more employees than allowed for in the space provided, please photocopy the page. If you already have ALL these details recorded in your own format, you can enclose this with the application form.

In order for an employee to be able to join the employee benefit package, we need their forename, surname, National Insurance number, date of birth and address. You must inform your employees that you have passed their personal details on to B&CE.

PLEASE USE BLOCK CAPITALS

Employee details

Title: _____ Forename: _____ Surname: _____
NI number: _____ Date of birth: _____
Work number (optional): _____ Start date for benefits: _____
Address: _____
Town: _____ County: _____ Postcode: _____
Type of employee: Manual on-site construction worker Other (office-based)
Benefits required: EasyBuild Accident and Life Cover Holiday pay
Employees pay frequency: Weekly Monthly

Employee details

Title: _____ Forename: _____ Surname: _____
NI number: _____ Date of birth: _____
Work number (optional): _____ Start date for benefits: _____
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How you pay us

Payments to us are by Direct Debit, please complete the Direct Debit Instruction below. If you are unable to pay by Direct Debit please contact us.

- You will receive a statement of account each month. This will confirm the amount to be deducted and date of collection (which is normally 7-9 days after you receive your statement).
- Please enter the fixed amount of holiday pay you would like us to collect each month in the box below:

Please enter the fixed amount of holiday pay £:

Please note that HMRC only allow you to claim the National Insurance concession on holiday pay for eligible operatives. Please refer to our eligibility guide for further information www.bandce.co.uk/HolidayPay

If you need to change the amount of your fixed payments, please call us on 08457 414142 or 01293 586790 (To help us improve our service, we may record your call).

Instruction to your Bank or Building Society to pay by Direct Debit



Please fill in the form and send to: B&CE Benefit Schemes,
FREEPOST CY384, Crawley, West Sussex, RH10 9BR.

Service User Number:

8 4 2 9 2 1

Reference Number (B&CE Use only)

Instruction to your Bank or Building Society.

Please pay B&CE Benefit Schemes 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 B&CE Benefit Schemes and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date

To: The Manager Bank/Building Society

Address

Postcode

Name(s) of Account Holder(s)

Branch Sort Code

Bank/Building Society Account Number

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 take part in the Direct Debit Scheme. This efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change, B&CE Benefit Scheme will notify you 10 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by B&CE Benefit Schemes or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.

How we pay you

Payments due to you will be paid directly into your account. Please provide details below:

Name of bank/building society: _____

Bank/building society address including postcode: _____

Account name: _____

Branch sort code: _____

Bank account number: _____

We instruct you to pay direct payments to our account in respect of all claims for payment submitted to your office. We reserve the right to cancel this arrangement at any time.

Please include an original copy of one of the following, as evidence of the above details: blank cheque (cancelled), paying in slip or bank statement. Please tick the box if you would like it to be returned to you when your account has been set up . If we need further evidence we will contact you and let you know.

Declaration

We confirm the above details are correct.

This form should be signed by an authorised person.

Print name:	<input type="text"/>	Position:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>

Please use the checklist below to ensure we have all the required details to set up your account.

- Your company details (including telephone number & postcode)
- Your pension contribution arrangement
- All personal details for employees
- Completed Direct Debit form
- You have enclosed an original copy of a blank cheque (crossed), paying in slip or bank statement
- Signed Declaration
- If you have not been visited by a B&CE representative please include proof of address
e.g. Utility Bill or Bank Statement

Please ensure you inform your employees that you have passed their details on to B&CE.

Thank you for choosing B&CE, once we have received your application form we will set up your account and send the relevant paperwork for your account.

for more information: tel **08457 414142** or **01293 586790** email **info@bandce.co.uk** To help improve our service, we may record your call.



Building & Civil Engineering
Holidays Scheme Management Ltd
Manor Royal, Crawley
West Sussex, RH10 9QP
www.bandce.co.uk

Building and Civil Engineering Holidays Scheme Management Limited is a representative of B&CE Insurance Limited, which provides the stakeholder pension and is authorised and regulated by the Financial Services Authority.