

The Impaired Life Property Plan

Retirement Plus offers the Impaired Life option – this is available to homeowners aged 65 and over, suffering from any of the following conditions:

- ▶ Heart disease (excluding raised blood pressure)
- ▶ Diabetes that requires insulin treatment
- ▶ Stroke or paralysis
- ▶ Longstanding breathing problems (excluding asthma)
- ▶ Circulatory disease
- ▶ Liver disease that requires long-term treatment
- ▶ Hepatitis C or HIV infection

The Open Options Impaired Life Property Plan is based on our Open Options Property Plan but with three key differences.

So what's different about the Impaired Life option?

- ▶ As life expectancy is reduced, we may be able to offer significantly more cash, even with our protected share option – and it's all tax-free
- ▶ Release large amounts of cash in exchange for an 0.05% loading per month over our standard equity transfer rate – this means our share increases faster
- ▶ A Medical Underwriting Fee of £200 is payable to cover the costs of medical underwriting – there is no cost to obtain a quote. If there are two applicants who require medical reports – each applicant is required to pay the £200 fee

Retirement Plus offers you choice

The Open Options Property Plan is also available, so it is worth obtaining a quote on both products to decide which is most suitable, based on specific circumstances and needs.

- ▶ Under the Impaired Life option the Retirement Plus share increases at a faster rate, but more cash is available at the outset
- ▶ Under the Open Options Property Plan less cash is available at the outset, but the Retirement Plus share increases at a lower rate

Broker Contact Centre

Open Monday to Friday 9am to 5pm

 **0845 850 8510**

F 0845 602 6437 E operations@retirement-plus.co.uk

www.retirement-plus.co.uk

So how much is available?

Harry

Harry is 71 and owns a property worth £200,000. Harry had a stroke two years ago. He has diabetes treated with insulin and a significant heart disease. He wants to raise the maximum amount available.

Property Plan Product	Monthly Equity Transfer Rate	Amount available	Maximum level of Retirement Plus Share (99.9%) reached after:
Open Options Property Plan in good health	0.64%	£81,200	11 years and 10 months
Open Options Impaired Life Property Plan	0.69%	£106,599	7 years and 8 months

Jenny and John

Jenny aged 71 and John aged 73 own a property worth £300,000. John is healthy but Jenny has diabetes, raised blood pressure and is overweight. She also has a history of angina. They want to retain 50% of their property as a protected share.

Property Plan Product	Monthly Equity Transfer Rate	Amount available	Maximum level of Retirement Plus Share (99.9%) reached after:
Open Options Property Plan in good health	0.64%	£58,600	12 years and 4 months
Open Options Impaired Life Property Plan	0.69%	£65,325	10 years and 1 month

Ask for an illustration

Financial Advisers should complete the Quotation Request opposite and fax or email this to our Broker Contact Centre – you don't need to obtain your client's signature and there's no charge. Alternatively, call us and we will take the information over the telephone.

What happens next?

- ▶ We will send your quotation request to our medical underwriters for an initial assessment – they have a service standard turn around of 24 hours
- ▶ We will e-mail you KFIs for all products, so that you can make a recommendation to your client
- ▶ If your client decides to proceed with an Impaired Life option, you need to obtain a £200 Medical Underwriting Fee in addition to our normal valuation fee
- ▶ We will obtain full medical underwriting including a written report from your client's doctor
- ▶ An offer will be issued in the normal manner – if there are any changes to the amount we can offer we will contact you first

Access to Medical Reports

If your client decides to proceed and complete the Impaired Life Application Form, Retirement Plus will, via its agent, wish to approach their doctor for a medical report concerning their health.

Before this is done they will be notified so that they can, if they wish, exercise their rights under the Access to Medical Reports Act 1988.

Your Client's Rights

Their rights are summarised below:

- ▶ They may arrange to see the report before it is sent to our agent or during the 6 months after that;
- ▶ They may withhold their consent to their doctor sending the report to our agent;
- ▶ They have the right to ask their doctor to change parts of the report that they consider inaccurate or misleading. If their doctor is not in agreement with the changes they may add their own comments to the report.

They should be aware that their doctor is able to withhold the report (or part of it) from them if he believes they would be harmed by seeing it.

We may from time to time need to process personal data about your client which the Data Protection Act 1998 defines as sensitive, including this health information. By providing this data you signify your client's consent to such data being processed by Retirement Plus and any subsequent owner of your client's Property Plan.

The Impaired Life Property Plan Illustration Request

Intermediary Details

Intermediary Name	<input type="text"/>		
Company Name and Address	<input type="text"/>		
Telephone Number	<input type="text"/>	Email Address	<input type="text"/>

Applicant Details

	Applicant One	Applicant Two
Name	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text"/>	<input type="text"/>
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address	<input type="text"/>	

Property Plan Requirements

Estimated Property Value	£	<input type="text"/>
What do you require?		<input type="button" value="Yes"/>
Maximum amount available <i>or</i>		<input type="text"/>
Minimum Protected Share to be retained <i>or</i>		<input type="text"/> %
Specified amount – we will automatically allocate a minimum protected share	£	<input type="text"/>

Health Questionnaire

Please be aware that if you have not answered 'Yes' to at least one of the parts in this Question, for at least one applicant, it is unlikely that we will be able to improve our standard Property Plan terms.

	Applicant One		Applicant Two	
	Yes	No	Yes	No
1) Have you had or are you currently suffering from one or more of the following diseases?				
a) Heart disease, excluding raised blood pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Diabetes that requires insulin treatment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Stroke or paralysis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Longstanding breathing problems (excluding asthma)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Circulatory disease?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Liver disease that requires long term treatment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Longstanding obesity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Hepatitis C or HIV infection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered 'Yes' to any of the above, please give details including dates and treatment together with any medication that is currently being taken.

Please continue overleaf.

Additional information.

2) Do you smoke or use any tobacco products?

If Yes, please give details:

a) Cigarettes (number per week)

b) Other (specify and state number per week)

Applicant One

Applicant Two

3) What is your alcohol consumption per week?

One unit is the equivalent of one glass of wine, or a half pint of normal strength beer, or a single pub measure of spirits

Units

Units

4) Have you ever been advised to reduce your consumption of tobacco or alcohol?

Yes

No

Yes

No

If you have answered 'Yes' to the above, please give details.

Applicant One

Applicant Two

5) a) What is your height (without shoes)?

 / feet/inches or cms / feet/inches or cms

b) What is your weight (in indoor clothing)?

 / st/lbs or kgs / st/lbs or kgs

For office use only

Broker Contact Centre

Retirement Plus Ltd, Newcombe House, 45 Notting Hill Gate, London W11 3LQ
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