

Chapter 16

Reporting requirements

SUP Ann 6R: Persistency Report

1. 1R1 – Persistency Report
2. 1R2 – Additional Persistency Report
3. 1R3 – Persistency Report – Contribution Holidays
4. 1R4 – Stakeholder Pension Data Report

Persistence Report

To be submitted by 30 April each year. See SUP 16.3 for method of submission.

Name of Firm: Firm Reference Number:

Regular Premium Policies / Single Premium Policies:

Ordinary Assurance Policies / Industrial Assurance Policies:

Year in which Policies Effected:

12 Month Report / 24 Month Report / 36 Month Report / 48 Month Report:

Policies promoted:	by representative			by independent intermediary		
Policy Type	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistence rate	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistence rate
Endowment Assurance						
Whole Life Assurance						
Personal Pension Policy						
Other Pension Policy						
Other Life Assurance						
Income Withdrawal						
Group Personal Pension policy						
Insurance ISA						
Mortgage endowment						

Policies promoted	through the firm's own direct offer financial promotion			otherwise		
Policy Type	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistence rate	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistence rate
Endowment Assurance						
Whole Life Assurance						
Personal pension policy						
Other Pension Policy						
Other Life Assurance						
Income Withdrawal						
Group Personal Pension policy						
Insurance ISA						
Mortgage endowment						

Notes to persistency report

Firms must provide (either below or on a separate sheet of paper):

- details of any alternative approaches used to calculate figures if this is permitted by the rules in *SUP* 16.8;
- a note of any types of policy for which no figures have been submitted (including any types to be reported on in Forms 1R(2) and 1R(3));
- a brief explanation of the effects of inaccuracies on the figures for previous years which have already been supplied; and
- confirmation that regular premium life policies have only been treated as in force in accordance with *SUP* 16.8.16R (1).

Expressions which are defined in the Handbook Glossary, or in *SUP* 16.8, have the same meanings in this form.

Signature and declaration

Knowingly or recklessly giving the *FSA* information which is false or misleading in a material particular may be a criminal offence (sections 398 and 400 of the Financial Services and Markets Act 2000). *SUP* 15.6.1R and *SUP* 15.6.4R require an *authorised person* to take reasonable steps to ensure the accuracy and completeness of information given to the *FSA* and to notify the *FSA* immediately if materially inaccurate information has been provided. *SUP* 16.3.11R requires an *authorised person* to submit reports containing all the information required. *APER* 4.4.6E provides that, where an *approved person* is responsible for reporting matters to the *FSA*, failure to inform the *FSA* of materially significant information of which he is aware is a breach of *Statement of Principle 4*. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the *FSA*. It should not be assumed that information is known to the *FSA* merely because it is in the public domain or has previously been disclosed to the *FSA* or another regulatory body. If there is any doubt about the relevance of information, it should be included.

I confirm that the information in this form is accurate and complete to the best of my knowledge and belief and that I have read the Notes to this form.

Signature

Name (BLOCK CAPITALS):

The following person should be contacted with any queries that may arise:

Name: Title:

Address:

.....

.....

Telephone Number: e-mail:

Form 1R (2)

Persistency Report - short term endowments/ assurance

To be submitted by 30 April each year. See *SUP* 16.3 for method of submission.

Name of Firm:

Firm Reference Number :

Regular Premium Policies / Single Premium Policies:

Ordinary Branch Policies / Industrial Branch Policies:

Year in which Policies Effected:

12 Month / 24 Month / 36 Month / 48 Month report:

Policies promoted:	by representative			by independent intermediary		
	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistency rate	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistency rate
2 (<3) year term						
3 (<4) year term						
4 (<5) year term						
Total						

Policies promoted:	through firm's own direct offer financial promotion			otherwise		
	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistency rate	Number effected during the year (CC)	Number in force at end of Y-1 (CF)	Persistency rate
2 (<3) year term						
3 (<4) year term						
4 (<5) year term						
Total						

Expressions which are defined in the Handbook Glossary, or in SUP 16.8, have the same meanings in this form.

Signature and declaration

Knowingly or recklessly giving the FSA information which is false or misleading in a material particular may be a criminal offence (sections 398 and 400 of the Financial Services and Markets Act 2000). SUP 15.6.1R and SUP 15.6.4R require an *authorised person* to take reasonable steps to ensure the accuracy and completeness of information given to the FSA and to notify the FSA immediately if materially inaccurate information has been provided. SUP 16.3.11R requires an *authorised person* to submit reports containing all the information required. APER 4.4.6E provides that, where an *approved person* is responsible for reporting matters to the FSA, failure to inform the FSA of materially significant information of which he is aware is a breach of *Statement of Principle 4*. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the FSA. It should not be assumed that information is known to the FSA merely because it is in the public domain or has previously been disclosed to the FSA or another regulatory body. If there is any doubt about the relevance of information, it should be included.

I confirm that the information in this form is accurate and complete to the best of my knowledge and belief.

Signature:
Name (BLOCK CAPITALS):
The following person should be contacted with any queries that may arise:
Name: Title:
Address:
.....
.....
Telephone Number: e-mail:

Form 1R (3)

Persistency Report – Contribution Holidays

To be submitted by 30 April each year. See SUP 16.3 for method of submission.

Name of Firm:

Firm Reference Number : Year in which Policies Effected:

12 Month Report/24 Month Report/36 Month Report/48 Month Report:

Policies promoted:	by representative			by independent intermediary		
Policy Type	Number effected during the year (CC)	Number subject to contribution holiday at end of Y-1 (CH)	Holiday factor (CH/CC)	Number effected during the year (CC)	Number subject to contribution holiday at end of Y-1 (CH)	Holiday factor (CH/CC)
Endowment Assurance						
Whole Life Assurance						
Personal Pension Policy						
Other Pension Policy						
Other Life Assurance						
Income Withdrawal	N/a	N/a	N/a	N/a	N/a	N/a
Group Personal Pension policy						
Insurance ISA						

Policies promoted:	through firm's own direct offer financial promotion			otherwise		
Policy Type	Number effected during the year (CC)	Number subject to contribution holiday at end of Y-1 (CH)	Holiday factor (CH/CC)	Number effected during the year (CC)	Number subject to contribution holiday at end of Y-1 (CH)	Holiday factor (CH/CC)
Endowment Assurance						
Whole Life Assurance						
Personal pension policy						
Other Pension Policy						
Other Life Assurance						
Income Withdrawal	N/a	N/a	N/a	N/a	N/a	N/a
Group Personal Pension policy						
Insurance ISA						
Mortgage endowment						

Expressions which are defined in the Handbook Glossary, or in SUP 16.8, have the same meanings in this form.

Signature and declaration

Knowingly or recklessly giving the FSA information which is false or misleading in a material particular may be a criminal offence (sections 398 and 400 of the Financial Services and Markets Act 2000). SUP 15.6.1R and SUP 15.6.4R require an *authorised person* to take reasonable steps to ensure the accuracy and completeness of information given to the FSA and to notify the FSA immediately if materially inaccurate information has been provided. SUP 16.3.11R requires an *authorised person* to submit reports containing all the information required. APER 4.4.6E provides that, where an *approved person* is responsible for reporting matters to the FSA, failure to inform the FSA of materially significant information of which he is aware is a breach of *Statement of Principle 4*. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the FSA. It should not be assumed that information is known to the FSA merely because it is in the public domain or has previously been disclosed to the FSA or another regulatory body. If there is any doubt about the relevance of information, it should be included.

I confirm that the information in this form is accurate and complete to the best of my knowledge and belief.

Signature:
Name (BLOCK CAPITALS):
The following person should be contacted with any queries that may arise:
Name: Title:
Address:
.....
.....
Telephone Number: e-mail:

Form 1R (4)

Stakeholder Pension Data Report

See SUP 16.3 for method of submission.

Name of Firm: Firm Reference Number :

Year or relevant period in which Policies Effected:

Extra Report / 12 Month Report / 24 Month Report / 36 Month Report / 48 Month Report :

Stakeholder pensions promoted:	by representatives			by independent intermediaries		
Stakeholder pension type	Number effected during the period (CC)	Number in force at end of period (CF)	Persistency rate	Number effected during the period (CC)	Number in force at end of period (CF)	Persistency rate
New regular premium stakeholder pensions						
Substitute regular premium stakeholder pensions						
New single premium stakeholder pensions						
Substitute single premium stakeholder pensions						

Stakeholder pensions promoted:	through the firm's own direct offer financial promotion			otherwise (see notes)		
Stakeholder pension type	Number effected during the period (CC)	Number in force at end of period (CF)	Persistency rate	Number effected during the period (CC)	Number in force at end of period (CF)	Persistency rate
New regular premium stakeholder pensions						
Substitute regular premium stakeholder pensions						
New single premium stakeholder pensions						
Substitute single premium stakeholder pensions						

Stakeholder pensions promoted:	as adopted package products		
Stakeholder pension type	Number effected during the period (CC)	Number in force at end of period (CF)	Persistency rate
New regular premium stakeholder pensions			
Substitute regular premium stakeholder pensions			
New single premium stakeholder pensions			
Substitute single premium stakeholder pensions			

Notes to data report

An "Extra Report" is a report under *SUP* 16.8.3R (2) (b).

In the 'otherwise' section, firms must include stakeholder pensions not included in any other section.

Firms must provide (either below or on a separate piece of paper):

- details of any alternative approaches used to calculate figures if this is permitted by the rules in *SUP* 16.8;
- a note of any types of policy for which no figures have been submitted;
- a brief explanation of the effects of inaccuracies on the figures for previous years which have already been supplied; and
- confirmation that regular premium stakeholder pensions have only been treated as in force in accordance with *SUP* 16.8.16R (3).

Expressions which are defined in the Handbook Glossary, or in *SUP* 16.8, have the same meanings in this form.

Signature and declaration

Knowingly or recklessly giving the *FSA* information which is false or misleading in a material particular may be a criminal offence (sections 398 and 400 of the Financial Services and Markets Act 2000). *SUP* 15.6.1R and *SUP* 15.6.4R require an *authorised person* to take reasonable steps to ensure the accuracy and completeness of information given to the *FSA* and to notify the *FSA* immediately if materially inaccurate information has been provided. *SUP* 16.3.11R requires an *authorised person* to submit reports containing all the information required. *APER* 4.4.6E provides that, where an *approved person* is responsible for reporting matters to the *FSA*, failure to inform the *FSA* of materially significant information of which he is aware is a breach of *Statement of Principle 4*. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the *FSA*. It should not be assumed that

information is known to the *FSA* merely because it is in the public domain or has previously been disclosed to the *FSA* or another regulatory body. If there is any doubt about the relevance of information, it should be included.

I confirm that the information in this form is accurate and complete to the best of my knowledge and belief and that I have read the Notes to this form.

Signature:

Name (BLOCK CAPITALS):.....

The following person should be contacted with any queries that may arise:

Name: Title:

Address:

.....

.....

Telephone Number e-mail: