**LifeChange benefit application form**

**About you**

The member The member’s Next of Kin Other (please specify)

**Section 1**   
Member details:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of member** |  | | |
| **Membership no.** |  | **Date of Birth** |  |

**Section 2**

Your contact details (to be completed by member or claimant):

|  |  |
| --- | --- |
| **Your name (if you’re not the member)** |  |
| **Your address** |  |
| **Your email** |  |
| **Your phone number** |  |

**Which part of the LifeChange benefit are you applying for?**

Bereavement (death of member or member’s child/spouse/partner) Go to section 3

Accident-related injury benefit Go to section 4

65th birthday bonus Go to section 5

**Section 3**

Bereavement benefit

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Are you the next of kin?** | **Yes/No** | **Are you acting on behalf of other relatives/beneficiaries?** | | **Yes/No** |
| **Who is the deceased? (Tick as appropriate)**  **Son or daughter aged under 18:**  I enclose a copy of birth and death certificates  **Spouse of member:**  I enclose a copy of marriage and death certificates  **Partner of member:**  I enclose a copy of death certificate and evidence  of financial inter-dependence (joint accounts, bills etc.)  **The member:**  I enclose a copy of the member’s death certificate | | | **Name of deceased (if not the member):**  **Date of death:** | |
| **If you are claiming for the member’s death, please give details of your relationship to the member** |  | | | |

**Section 4**

Accidental injury benefit:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of injury** |  | **Have you lost your job as a result of the injury?** | | **Yes/No** |
| **Please consult the notes and provide full details of your injury**  **Please tick the boxes to indicate enclosures** | I enclose evidence of my loss of employment/contract  I enclose a GP/consultant note as evidence | | | |
| **What date was the termination of your contract/employment?** | | |  | |

**Section 5**

Your signature: (by signing this form, you acknowledge acceptance of the terms & conditions)

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed** |  | | |
| **Print name** |  | **Date** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Union benefit payments are issued by bank transfer or BACS. Please provide details of the bank account into which any payment should be made. | | | |
| SORT CODE | ACCOUNT NUMBER | NAME OF BANK | PAYEE NAME |
|  |  |  |  |

**The effective start date of Community’s LifeChange benefit is 1st January 2019.**

Data Protection Notice. The information you give when completing this form will be used in accordance with relevant data protection legislation and to process and create an electronic and paper record of your benefit application. The information will be kept securely, and will be kept no longer than necessary to process the benefit. See www.community-tu.org/privacy for more information.

**Please email this completed form together with copies of any necessary paperwork to;**

David Fiddler at [dfiddler@community-tu.org](mailto:dfiddler@community-tu.org) or send by post to**;**Business Reply Plus RTXK-JZTU-TUCR, Community Member Service Centre, Elgar House,   
Green Street, KIDDERMINSTER DY10 1JF

HEAD OFFICE USE ONLY:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Joining date** | **Years membership** | **Status** | | | |
|  |  | **Working** | **Community** | **Retired** | **Other** |
| **Termination Benefit claim?** | **Yes/No** | **Years@£200** |  | **Amount (£)** |  |
| **TB claim date** |  | **Years@£20** |  | **Amount (£)** |  |
| **TB claim amount** |  | **Total years** |  | **Total (£)** |  |
| **Total Benefit payable** |  | **Retired/Other description** | |  | |
| **Notes/workings** |  | | | | |
| **Benefit-Life Acc T1** | **x1 Amount (£)** | | | | |
| **Benefit-Life Acc T2** | **x5 Amount (£)** | | | | |
| **Benefit-Life Drawdown 65** | **x0.1 Amount (£)** | | | | |
| **Benefit-Life Bereavement Spouse** | **x0.5 Amount (£)** | | | | |
| **Benefit-Life Bereavement Child** | **x0.5 Amount (£)** | | | | |
| **Benefit-Life Bereavement Member** | **x1 Amount (£)** | | | | |

**LifeChange Terms & Conditions**

Your LifeChange account is held by Community, builds up over time and is available at life changing moments to help you and your family.

Working members accrue £200 each year for the first 6 years of membership, and £20 each year thereafter. (This equals a total of £1,380 after the first 15 years, and £1,580 after 25 years).

As a retired member this benefit continues to accrue at £20 each year and is still available as long as you continue your membership. If you leave the union, the benefit is lost.

If you become unemployed during your first 6 years of membership, you will continue to accrue £20 each year whilst you are not working. As soon as you let us know about any new employment, you can continue to accrue this benefit at the normal rate.

If you join as a non-working member, you will be entitled to a £200 flat rate after one year, and the regular rate will commence after you’ve found employment and informed us of this.

You can access the accrued amount under your LifeChange benefit in a number of ways as follows.

**Accident-related injury benefit**

There are two tiers to this part of the benefit.

Tier 1 – If you suffer an accident-related injury which prevents you from continuing with your current employment, you can access the full amount of your accrued benefit.

Tier 2 – If you suffer a serious accident-related injury (as defined under the prescribed list of injuries below), which prevents you from continuing with your current employment, you can access an amount equivalent to five times your accrued benefit.

The prescribed list of serious injuries is as follows:

* Loss of, or permanent loss of use of, a limb;
* Loss of, or permanent loss of use of, an entire thumb, finger or toe;
* Permanent total loss of use of a shoulder, elbow, hip, knee, ankle or wrist;
* Permanent total loss of sight in one or both eyes;
* Permanent total loss of hearing in both ears;
* Permanent total loss of speech.

In support of your application, you will need to submit evidence of your loss of employment, together with medical evidence in the form of a letter from your General Practitioner or treating Consultant, outlining your accident-related injury. (If you are pursuing a personal injury claim arising out the accident, relevant medical evidence may be available to you through the lawyer acting in your case.)

The union reserves the right to seek any additional supporting evidence we may need and to postpone the payment of benefits until such time that we have enough evidence to determine what level of benefit is payable.

If you receive a payment under this benefit, your LifeChange benefit accrual amount will reduce to a nil balance, but will continue to accrue at the appropriate rate thereafter.

The effective start date of the union’s LifeChange benefit is 1st January 2019. In relation to the accident-related injury element of the benefit, applications will only be considered where the index accident and the loss of employment occur after the effective start date.

**65th Birthday Bonus**

When you reach the age of 65, you can access 10% of your accrued benefit.

This is optional, and if you choose not to access the benefit when you reach the age of 65, your accrual amount will remain unaffected and can be used for other purposes at a later date.

Whether you choose to access this part of the benefit or not, your benefit will continue to accrue beyond the age of 65 at the normal rate.

If you choose to access this part of the benefit when you reach the age of 65, you must submit your application to the union within 12 months of your 65th birthday. If you don’t submit your application within this time, you won’t be able to do so later, and your benefit will simply remain where it is, unaffected, and will continue to accrue.

The effective start date of the union’s LifeChange benefit is 1st January 2019.

In relation to the age-related element of the benefit, applications will only be considered where the relevant age is reached after the effective start date.

**Bereavement benefit**

If the worst happens and your spouse/partner or child under the age of 18 passes away, you can access 50% of the amount accrued under your LifeChange benefit, to assist you with the funeral costs.

You will need to submit evidence in support of your application.

If you are claiming following the death of your spouse, you will need to provide a copy of the deceased’s death certificate and a copy of your marriage certificate.

If you are claiming following the death of your partner, you will need to provide a copy of the deceased’s death certificate and evidence of financial dependence, for example a joint bank account statement or a utility bill.

If you are claiming following the death of a child under the age of 18, you will need to provide a copy of the deceased’s birth certificate and death certificate.

The effective start date of the union’s LifeChange benefit is 1st January 2019.

In relation to the death of a spouse/partner/child element of the benefit, applications will only be considered where the relevant date of death occurs after the effective start date.

Your next of kin will be able to access the amount accrued under your LifeChange benefit after you die, to assist them at that very difficult time.

The amount of benefit available will depend on how much you have accrued during your membership with the union, and on what payments you have received, if any, during your lifetime, in regard to the other aspects of the benefit, listed above.

Your next of kin will need to submit evidence in support of their application, in the form of a death certificate.

In relation to death of a member, where the date of death precedes the effective start date, the member’s entitlement to the union’s former Bereavement Benefit will remain unaffected.