

# Employee Accident Cover and Employee Life Cover from B&CE

# **Application form**

For construction employers who would like to offer financial protection for employees by providing employee accident and life cover

This form is an editable pdf. Simply save your own copy and then complete the form.

If you have any questions please call 01293 586666.

# Section 1: About you

# 1.1 Your company details

Company name	
Address	
Town	
County	
Postcode	
Company Registration Number (if applicable)	
Do you belong to any federation/ trade associations?	Yes No
If yes, please state which	
Are you associated with a company that is currently a customer of B&CE?	Yes No Don't know
If yes, please state name of associated company	
1.2 Your contact details	
Title (Mr/Mrs/Ms/Other)	
Full name	
Position	
Direct telephone number	
Mobile telephone number	
Direct email address	
1.3 Admin account contact details (if differ	ent)
1.3 Admin account contact details (if different title (Mr/Mrs/Ms/Other)	ent)
	ent)
Title (Mr/Mrs/Ms/Other)	ent)
Title (Mr/Mrs/Ms/Other) Full name	ent)
Title (Mr/Mrs/Ms/Other) Full name Position	ent)
Title (Mr/Mrs/Ms/Other)  Full name  Position  Direct telephone number	ent)

# Section 2: About your employee benefits

If you operate the CIJC (Construction Industry Joint Council) Working Rule Agreement, you'll need to provide accident cover and life cover to your operatives as part of the Agreement. Employee Accident Cover from B&CE (EAC) and the Employee Life Cover from B&CE (ELC) are available to help you fulfil this obligation. You'll also need to provide pension benefits.

B&CE's The People's Pension has been nominated by CIJC as the preferred pension scheme to satisfy the CIJC requirement to provide pension benefits for operatives employed under CIJC terms. Please contact us for details of this scheme.

Use this form to join EAC and ELC. The amounts shown below are correct as at August 2016.

Which month do you wish the benefits to start: (Please note this cannot be in arrears.)

#### Employee Accident Cover from B&CE and Employee Life Cover from B&CE

EAC is an essential element of B&CE's employee benefits plan, protecting your workforce, encouraging them to return to work, and enhancing your reputation as a caring employer.

Under ELC, B&CE gives you the opportunity to provide various levels of cover for different categories of employees. The life cover available is:

Life cover level	Life cover provided*	Weekly cost per employee
x1 (Standard)	£32,500 in the event of death of an employee (£65,000 in the event of accidental death at work)	£1.39
x2 (Double)	£65,000 in the event of death of an employee (£130,000 in the event of accidental death at work)	£2.46
x3 (Triple)	£97,500 in the event of death of an employee (£195,000 in the event of accidental death at work)	£3.53

<sup>\*</sup>Except in the case of ill health or unemployment

Please define your membership categories below, ensuring you define the category against the correct level of ELC to be provided for that category in the following table:

Membership category criteria** (Please define your membership categories eg 'all employees' or 'all managers', or 'all employees with over 1 years' service')	Life cover to be provided under ELC	Multiples of Life cover
	А	x1 (Standard)
	В	x2 (Double)
	С	x3 (Triple)

<sup>\*\*</sup>Please see the EAC/ELC Technical Guide for Employers for more information.

#### Please note:

- at least 95% of all eligible employees that you employ in each of the groups described above must be covered in the relevant category
- for life cover under ELC, where more than one category is being established, each one must contain a minimum of five employees
- only members who are 'actively at work' are eligible to join the schemes. That means they must be in full
  active employment, physically and mentally able to perform all the duties associated with their normal job
  on the day the cover is due to start.

# Section 3: Your employees' details

Please complete the member schedule spreadsheet with the details of your employees you would like to include for EAC/ELC.

An example template in the preferred format is available on the B&CE website at **www.bandce.co.uk/template-for-eac-elc**.

You must inform your employees that you have passed their personal details to B&CE.

# **Section 4: Data protection**

As an employer, you may be asked to provide or may offer information about your employees for the purposes of operating EAC/ELC on behalf of your employees.

Please ensure you tell your employees that you have passed on their details to B&CE. The information you provide will be used by B&CE to provide your employees with the benefits for which you apply and for maintaining records.

From time to time, we may contact your employees with information on other B&CE products and services which may be of interest to them. This may be by post, telephone or email. If they'd rather us not do this, they'll need to tell us by email or in writing, quoting their National Insurance number, full postal address, home phone number and email address.

Their information may be passed to selected third parties for underwriting, claims handling procedures, to provide services included in our schemes, as well as to prevent and detect fraud. Our Privacy Policy can be found on the B&CE website at **www.bandce.co.uk/privacy-policy**.

# **Section 5: Declaration and agreement**

Please ensure you have the necessary authority to enter into this contract – please tick the box below to confirm this.

#### Who has authority to enter into this contract?

Any person authorised to enter into contracts on behalf of the company specified below, either directly by means of an authority vested in them by the company's articles of association, partnership agreement or other constituting document (as appropriate), or by delegation under a power contained in that constituting document, or a person within that organisation who otherwise has authority to enter into contracts on behalf of the organisation. Please ensure you have the necessary authority to bind the company before proceeding.

the o	rganisation. Please ensure you have the necessary authority to bind the company before proceeding.
	By ticking this box, you are confirming that you have the necessary authority to enter into this contract with B&CE on behalf of the company named below.
	se carefully read each of the following declarations, and tick the boxes accordingly to tell us agree:
<b>1</b>	. I/We confirm that if we operate the CIJC Working Rule Agreement, it is my/our responsibility to follow that Agreement with regard to B&CE EAC and ELC for our operatives.
2	2. I/We confirm that the Employee Accident Cover from B&CE and Employee Life Cover from B&CE operated for our employees will be operated in accordance with the EAC/ELC Technical Guide for Employers, Rules of the Schemes and Policy Terms and Conditions* in force from time to time. I/We understand that employees must be 'actively at work' when cover commences and at least 95% of all eligible employees for a defined category must join (for ELC there must be a minimum of five employees in each category where more than one is established).
	3. I/We understand that as an employer, we may be asked to provide or may offer information about our employees for the purposes of EAC/ELC on behalf of our employees (see Section 4 above).

	4.	I/We understand that	90 days' written notice is required should we wish to cancel EAC/ELC.	
0	5.		details on this application form are correct and agree to operate EAC/ELC in documents and terms and conditions referred to in 2 and 3 above, and to comply them.	
0	6. I/We understand that in common with most financial services providers, B&CE will make checks on my/our company identity and address. To comply with anti-Money Laundering Regulations B&CE need to confirm the identity of employers wanting to provide EAC/ELC – this includes the employer's beneficion owners and directors. To do this B&CE may use electronic verification through SmartSearch, which reviews publicly available information on companies and individuals. If B&CE's checks fail to adequately confirm the employer's identity and beneficial ownership, B&CE may write to the employer to ask for more information.			
		e available at: dce.co.uk/employee-accident-life-	-cover, www.bandce.co.uk/eac-elc-scheme-rules and www.bandce.co.uk/eac-elc-terms-and-conditions	
	By ticking this box you are agreeing to enter into this contract with B&CE on behalf of the company named below and to bind it accordingly			
Fu	ıll no	ame		
Po	ositi	on		
C	omp	oany name		
D	ate			

# **Section 6: Payments**

If you're already operating The People's Pension or EasyBuild and want to use the same bank account for EAC/ELC, please skip this section.

Payments for EAC/ELC are made to us by Direct Debit.

Please include a copy of either:

If you do not operate The People's Pension or EasyBuild, please complete the Direct Debit mandate below. If your company has more than one bank account signatory, you will need to print the mandate and arrange for all signatories to sign the mandate.

#### **Bank** account evidence

Void cheque

Bank statement

Bank giro slip.

Please also send us evidence of the bank account which will be used for payment of contributions. We need this to satisfy Direct Debit rules regarding 'know your customer' and won't be able to set up your account without it.

	Instruction to your Ban Building Society to pay by Di	
Please fill in the form and send to: B&CE Holdings Limited, FREEPOST B&CE		Service User Number:
To: The Manager	Bank/Building Society	8 4 2 9 2 1  Reference Number (B&CE Use only)
Address		
	Postcode	Instruction to your Bank or Building Society. Please pay B&CE Holdings Limited Direct Debits from the account
Bank Account Name		detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with B&CE Holdings Limited and, if so, details will be passed
Branch Sort Code  Bank/Building Society Account Number		electronically to my Bank/Building Society.  Signature(s)  Date

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

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DIRECT

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.

- If there are any changes to the amount, date or frequency of your Direct Debit, B&CE Holdings Limited (B&CE) will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request B&CE to collect payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by B&CE or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society if you receive a refund you are not entitled to you must pay it back when B&CE ask you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

#### Returning the completed application if not completing Section 6

When you have completed this application, please email it to **support@bandce.co.uk** along with the completed member schedule spreadsheet.

We will then set up your account and contact you once it's done.

#### **Checklist**

Com	oleted	application	form
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Completed member schedule spreadsheet

#### Returning the completed application if completing Section 6

When you have completed this application, please post all items in the checklist to the address below.

We will then set up your account and contact you once it's done.

#### **Checklist**

Con	npleted	application	form
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Completed member schedule spreadsheet

Direct Debit mandate

Bank account evidence

#### Post to:

FREEPOST B&CE

For more information: www.bandce.co.uk

Email: support@bandce.co.uk

Telephone: 01293 586666

