

Allied Tooling Ltd Pension Plan  
Daws House  
33-35 Daws Lane  
London  
NW7 4SD

00869

**Adviser details**  
Mr Simon Hall  
Carter & Coley Financial Solutions Ltd  
3 Durrant Road  
Bournemouth  
Dorset  
BH2 6NE

**Client ref: 603776**

28 October 2013

Dear Sirs

**Allied Tooling Ltd Pension Plan**

**Re: 14260**

To ensure that your account is accurately reported to HM Revenue & Customs, we'd be grateful if you could please confirm whether or not the above account is a trust by completing the attached form.

Any trustee, or the adviser to the account, is able to complete the form on behalf of all individuals that are entitled to receive income. Once completed, please sign the form and return it to us in the pre-paid envelope provided.

Please note, we need you to complete this form even if there has been no change to the trust since it was opened with us.

It's important that we keep accurate records so please inform us any time there is a change in the future, for example a change of trustee, contact details or income recipient.

If you have any questions regarding this letter, please contact your adviser, whose details are provided above. Alternatively, if you need any assistance with the form, please contact us on 0845 604 4001. Lines are open Monday – Friday 9am – 5pm and calls may be recorded for training and quality purposes.

Yours faithfully



Graham Jackson  
Operations Director

Account name - Allied Tooling Ltd Pension Plan  
Client reference - 603776  
Designation - 14260

1. Is the account detailed above a trust?

Yes

☐

No

☐

2. Please confirm the type of account or trust (e.g. Discretionary trust, Bare trust, Will trust, Pension, Charity etc)

Please proceed to section 3 if

- (a) the above account is a **pension or charity** and the individuals receiving income from this trust live **outside the UK**, or
- (b) for **any other type of trust**, the individuals receiving income from this trust live **inside the UK**.

If neither is the case, please sign and return the form in the pre-paid envelope provided.

3. Please provide us with details of all individuals who are entitled to receive income from the trust below:

First named individual

Settlor

☐

Trustee

☐

Beneficiary

☐

Mr/ Mrs/ Ms/ Miss/ Other

Surname

Full first name(s)

Current permanent residential address

Postcode

Date of birth (DD/MM/YYYY)

For non UK residents please provide us with this individual's tax identification number (TIN) or their town and country of birth.

If there are more named individuals that are entitled to receive income, please make a copy of this sheet as necessary.

If there are no more named individuals please sign and date below.

**Additional named individual(s)**

Settlor

☐

Trustee

☐

Beneficiary

☐

Mr/ Mrs/ Ms/ Miss/ Other

Surname

Full first name(s)

Current permanent residential address

Postcode

Date of birth (DD/MM/YYYY)

For non UK residents please provide us with this individual's tax identification number (TIN) or their town and country of birth.

I confirm that I am a trustee or the adviser to this account and I am providing this information on behalf of the trust.

Signed..... Print name.....

Date .....

**Please return to us in the pre-paid envelope to Cofunds Limited, PO Box 1103, Chelmsford, CM99 2XY.**