

## **Church House Trust**

BANK ACCOUNT APPLICATION FORM			
Name of SSAS - D. A. P. Trading Penson Scheme Designated Client A/C			
	PSTR No.		
Professional Trustee (full name)		Address	
<b></b>			
Trustee (full name) (For copy bank statements to be		Address 7 WILLIAM BUSH CLOSE	
sent) DAVID POINDEXTER		CAUSTON NORWICH, ORIO LAG	
Trustee (full name)		Address	
Trustee (full name)		Address	
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Trustee (full name)		Address	
I/We authorize Church House Trust to release any information to the following company that they may request in connection			
with this account.			
FA/Practioner/SSAS adviser (Name and address) Posい Prationer . Con			
Daws House, 33-35 Daws Lone, London, NWT LSD			
We wish to open a Church House Trust Instant (For internal use only) Access Account. Interest earned will be added to Number:			
the account.		(60 05 24)	
		ank Account Number:	(60-95-31)
Contact telephone number (work) Mobile 07795 104465			
E-Mail Print Manual Of Chy @ instyhe fa . Com			
E-Matt			
We have read and agree to the terms and conditions applicable to this account, and authorise and request that Church House Trust pay all cheques and other instructions for payment signed on our behalf by any of the one/ two of the following duly authorised officials (delete as appropriate).			
Signed on behalf of the Professional Trustee (if applicable)		<b>&gt;</b>	Date
Signed on behalf of the Trustee			Date 15.12.2013
Signed on behalf of the Trustee			Date
Signed on behalf of the Trustee			Date
Signed on behalf of the Trustee			Date

Church House Trust Limited 3 Goldcroft, Yeovil, Somerset BA21 4DQ Tel: 01935 609600 Fax: 01935 410674 www.church-house-trust.co.uk