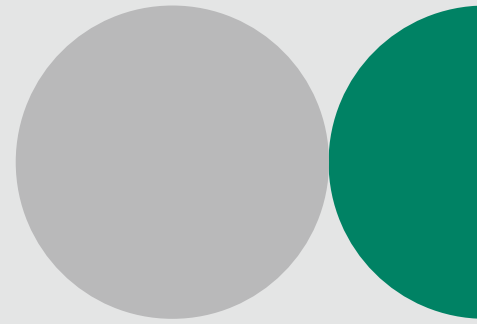


Declaration by Trustees

Wrap and Fundzone Account



This form is for use by trustees of an existing trust when applying for a Wrap or Fundzone account. It should be completed and signed by all trustees of the trust.

Please return the completed form to your financial adviser who will be able to upload it to the document library.

Declaration

NB. This form should not be amended and no terms should be added.

Name

Address and Companies House number (if applicable)

We, <input type="text"/>	of <input type="text"/>
<input type="text"/>	of <input type="text"/>
<input type="text"/>	of <input type="text"/>
<input type="text"/>	of <input type="text"/>
<input type="text"/>	of <input type="text"/>
and <input type="text"/>	of <input type="text"/>

all of the trustees of the

dated (for a will trust this will be the date of death)

being the applicants for account number

confirm that under the terms of the trust deed of the trust named above, we as trustees have suitable power to make investment decisions and to hold investments within the above wrap account on behalf of the trust.

<input type="text"/>	(signed)	<input type="text"/>	DD/MM/YYYY (date)
<input type="text"/>	(signed)	<input type="text"/>	(date)
<input type="text"/>	(signed)	<input type="text"/>	(date)
<input type="text"/>	(signed)	<input type="text"/>	(date)
<input type="text"/>	(signed)	<input type="text"/>	(date)
<input type="text"/>	(signed)	<input type="text"/>	(date)

Issued by a member of abr dn group, which comprises abr dn plc and its subsidiaries.

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