



## Protection

# Change of plan number

Your plan number has changed. Please complete this form to update your existing Royal London trust with your new plan number. Completing this form means you don't need to fill in a new trust form. As the plan owner you are the donor. After completing the form, please ask your trustees to sign it before sending it back to us. We'll then update your new plan number to note your existing Royal London trust and send confirmation to you which should be kept with the trust for safekeeping.

### Your Trust details ("the Trust")

|                                  |                                                                                                          |   |   |   |   |   |   |   |   |
|----------------------------------|----------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|
| Original plan number             | <input type="text"/>                                                                                     |   |   |   |   |   |   |   |   |
| New plan number                  | <input type="text"/>                                                                                     |   |   |   |   |   |   |   |   |
| Date Declaration of Trust signed | <table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> | D | D | M | M | Y | Y | Y | Y |
| D                                | D                                                                                                        | M | M | Y | Y | Y | Y |   |   |

**Note:** If your trust is a relevant life plan trust, please complete the principal employer's details at 'Donor 1'.

### Donor 1

### Donor 2

|          |                      |                      |
|----------|----------------------|----------------------|
| Name     | <input type="text"/> | <input type="text"/> |
| Address  | <input type="text"/> | <input type="text"/> |
|          | <input type="text"/> | <input type="text"/> |
|          | <input type="text"/> | <input type="text"/> |
|          | <input type="text"/> | <input type="text"/> |
| Postcode | <input type="text"/> | <input type="text"/> |

**Note:** The following is written as if one person is the donor. If there are 2 donors, please read 'I' as 'we', 'my' as 'our' and 'me' as 'us'.

I refer to the Trust by me in favour of the Trustees relating to the original Royal London plan. The original Royal London plan has been cancelled and replaced by the new Royal London plan. I hereby record that I wish the Trust's provisions to apply to the new Royal London plan in the same manner as they applied to the original Royal London plan.

### Donor 1

### Donor 2

|                                |                                                                                                          |                      |   |   |   |   |   |   |   |                                                                                                          |   |   |   |   |   |   |   |   |
|--------------------------------|----------------------------------------------------------------------------------------------------------|----------------------|---|---|---|---|---|---|---|----------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|
| Signature                      | <input type="text"/>                                                                                     | <input type="text"/> |   |   |   |   |   |   |   |                                                                                                          |   |   |   |   |   |   |   |   |
| Date                           | <table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> | D                    | D | M | M | Y | Y | Y | Y | <table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> | D | D | M | M | Y | Y | Y | Y |
| D                              | D                                                                                                        | M                    | M | Y | Y | Y | Y |   |   |                                                                                                          |   |   |   |   |   |   |   |   |
| D                              | D                                                                                                        | M                    | M | Y | Y | Y | Y |   |   |                                                                                                          |   |   |   |   |   |   |   |   |
| *Authorised signatory name     | <input type="text"/>                                                                                     | <input type="text"/> |   |   |   |   |   |   |   |                                                                                                          |   |   |   |   |   |   |   |   |
| *Authorised signatory capacity | <input type="text"/>                                                                                     | <input type="text"/> |   |   |   |   |   |   |   |                                                                                                          |   |   |   |   |   |   |   |   |

**Note:** \*If it's a relevant life plan trust and the principal employer is a corporate body, please add the name of the person signing on behalf of the business and the capacity in which they're signing, e.g. director.

# Trustee details

The Trustees confirm that they have received notice of the above request and confirm that the new Royal London plan will be held subject to the trust terms and conditions in the Declaration of Trust before referred to.

## Additional Trustee 1

|           |                                                                                                             |
|-----------|-------------------------------------------------------------------------------------------------------------|
| Signature | <div></div>                                                                                                 |
| Date      | <div><div>D</div><div>D</div><div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> |

## Additional Trustee 2

|           |                                                                                                             |
|-----------|-------------------------------------------------------------------------------------------------------------|
| Signature | <div></div>                                                                                                 |
| Date      | <div><div>D</div><div>D</div><div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> |

## Additional Trustee 3

|           |                                                                                                             |
|-----------|-------------------------------------------------------------------------------------------------------------|
| Signature | <div></div>                                                                                                 |
| Date      | <div><div>D</div><div>D</div><div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> |

## Additional Trustee 4

|           |                                                                                                             |
|-----------|-------------------------------------------------------------------------------------------------------------|
| Signature | <div></div>                                                                                                 |
| Date      | <div><div>D</div><div>D</div><div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> |



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We’re happy to provide your documents in a different format, such as braille, large print or audio, just ask us when you get in touch.

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