



ReAssure

## Fund Switch Authority Form

With this form you can authorise us to accept switch instructions from your nominated Financial Adviser.

A fund switch instruction is an instruction to sell units in one or more specified funds (or part of a fund) and to purchase units in one or more specified funds with the proceeds of the sale. It also covers a redirection instruction, which is an instruction to change the funds to be purchased with future regular contributions.

### Section 1 - Important information

- ) All policyholders or trustees must sign this form to confirm they accept its terms.
- ) If your nominated Financial Adviser does not have the necessary permission to carry out the activity of 'managing investments' under the Financial Services and Markets Act 2000, you must give them separate switch instructions every time a switch is carried out.
- ) If you change your Nominated Financial Adviser, this switching authority will not automatically transfer to your new Nominated Financial Adviser.
- ) If you wish to terminate this authority, you must tell us in writing to the address shown at the end of this form. We will treat this authority as ongoing until you tell us otherwise.
- ) If your bond, plan or account is subsequently assigned to another party (including into Trust), this authority will end.
- ) We do not offer any advice on the suitability of funds.
- ) You can switch funds online at [reassure.co.uk/switching-funds/](http://reassure.co.uk/switching-funds/) or by calling us and we'll take your request over the phone.
- ) We accept no liability for any delay in receipt of switch instructions from your nominated Financial Adviser or for any errors or omissions in any of the information entered by your nominated Financial Adviser when electronic instructions are submitted.
- ) We may refuse to carry out any instruction if it is incomplete or unclear.

### Section 2 - Policy Details

Please provide details below of any policies with ReAssure Life Limited:

Policy numbers:


**Section 3 - Policyholders' or Trustees' Declaration and Signatures**

I confirm that:

- you can rely and act on any switch instruction which has been given by my nominated Financial Adviser.
- I agree to authorise and confirm any actions carried out in good faith by my nominated Financial Adviser when exercising their fund switch authority.
- I agree that this switching authority will apply to all existing bonds, plans or accounts as detailed on this form until I tell you the authority has been terminated.
- I am legally entitled to effect any of the options or elections contained in the Terms applicable to the policies in the account, bond or plan that this agreement covers.

**If the policy or policies are in trust:**

I confirm that:

- the nominated Financial Adviser has been appointed as an agent in accordance with the express terms of the trust deed or the relevant legislation.
- this fund switch authority will remain in force and effect until I write to tell you otherwise or I write to inform you that the trustees have changed.

I declare that, to the best of my knowledge and belief, the statements made in this form are complete and correct.

<b>Policyholder's or trustee's Full name</b>	<b>Policyholder's or trustee's Signature</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Policyholder's or trustee's Full name</b>	<b>Policyholder's or trustee's Signature</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Policyholder's or trustee's Full name</b>	<b>Policyholder's or trustee's Signature</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Policyholder's or trustee's Full name</b>	<b>Policyholder's or trustee's Signature</b>	<b>Date</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>



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**Section 4 - To be completed by your Financial Adviser**

Financial Adviser's company name:

Adviser's name:

Financial Adviser's company address:

Postcode:

Email address:

Contact number:

Financial Services Register number:

Please tick one of the boxes below, as applicable

We confirm that we have the FCA "Managing Investments" Permission (which permits Discretionary Switching)

**or**

We do not have the FCA "Managing Investments" Permission and will obtain and retain a copy of our client's instruction to switch every time we submit a fund switch request.

Adviser signature:

Date:

When all the sections (sections 2, 3 and 4) have been completed, please send the form to:  
ReAssure Life Limited, Windsor House, Telford Centre, Telford, Shropshire, TF3 4NB.