

Deed of Assignment

Application Guide

Please complete this form in **BLOCK CAPITALS** and **black ink**.

The form covers the situation of an assignment of a policy by:

1. an absolute owner to Trustees of an existing Trust
2. Trustees to Trustees of another Trust, to satisfy the interest of the beneficiary in the Trust Fund

Please seek specialist legal and tax advice before completion.

Section A

Applicant to complete

In this Deed of Assignment of the policy detailed below, the following words have the following meanings:

1. The "Date of Assignment" means

D	D	M	M	Y	Y	Y	Y
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Enter here the date the policy is being assigned.

2. The "Assignor" means:

Enter here the name and address of all policyholders before the assignment.

First policyholder/Trustee

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)	Forenames
Surname	
Residential address	
Post Code	

Second policyholder (if any)/Trustee

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)	Forenames
Surname	
Residential address	
Post Code	

Third policyholder (if any)/Trustee

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)	Forenames
Surname	
Residential address	
Post Code	

Fourth policyholder (if any)/Trustee

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)	Forenames
Surname	
Residential address	
Post Code	

Section A - continued

3. The "Assignee" means:

Enter here the name and address of all policyholders after the assignment.

Assignee 1

Name Overseas Trust and Pension
Address PO Box 285, Elizabeth House, Les Ruettes Brayes, St Peter Port, Guernsey
Post Code GY1 4LX

4. The "Policy" (which expression includes all rights and obligations under the policy), means:

Life Assurance company

Name
Address
Post Code
Policy number

Nature of Assignor's ownership (please indicate)

- Absolute Owner Enter here the nature of the ownership of the assignor.
- Legal owner as Trustees of a Trust created by

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as Settlor by Declaration of Trust dated

D	D	M	M	Y	Y	Y	Y
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Enter here the name of settlor of Trust and date of Trust, if appropriate.

Section B

1. The Assignor hereby assigns the Policy with effect from the Date of Assignment to the Assignee as:

Nature of Assignee's ownership (please indicate)

- Absolute Owner Enter here the nature of the ownership of the assignee.
- As Trustees of

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by Declaration of Trust dated

D	D	M	M	Y	Y	Y	Y
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Enter here the name of settlor of Trust and date of Trust, if appropriate.

to be held by the Assignee upon the Trusts declared in the said instrument.

Section B - continued

Reason for the assignment (please indicate)

Enter here the reason for the assignment. For possible tax implications please see 'United Kingdom Tax' note.

- contribution to an OPES International Pension Plan
- settle to Trust
- gift
- to a beneficiary of a Trust
- other please specify

Section C

This instrument is executed as a deed and sealed (if required by law) all on the day and year first mentioned above.

1. Signed and delivered by the Assignors:

First policyholder/Trustee Assignors sign here.

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)	Forenames
Surname	
Signature	

Witness

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)	Forenames
Surname	
Signature	
Residential address	
Post Code	

Dated

Section C - continued

2. Signed and delivered by the Assignees:

Assignee 1 Assignees sign here.

Full Name Overseas Trust and Pension

Signature

Witness

Title (e.g. Mr/Mrs/Miss/Ms/Dr/Other)

Forenames

Surname

Signature

Address PO Box 285, Elizabeth House, Les Ruettes Brayes, St Peter Port, Guernsey

Post Code GY1 4LX

Dated

D	D	M	M	Y	Y	Y	Y
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June 2014

Overseas Trust & Pension

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