

Please complete the Parts below. Using the information you provide, we will prepare a Trust Deed to send to you for consideration by you and your professional advisers. Once you have decided to set up the Trust you will need to sign it to put the Trust into effect and complete the assignment of your Policy to that Trust.

Quotation or Policy Number

Part 1 – The Settlor(s)

The Settlor(s) are the Persons making the Declaration of Trust.

The Policyholder will always be a Settlor and a Trustee. If there are two Policyholders, both will be Settlor(s), and both will be Trustees.

Given that the Death Benefit will only be paid out on the Death of a Life Assured, it is necessary to appoint Trustees in addition to the Settlor(s); such as family members, friends or professional advisers such as accountant or lawyers or a professional Trustee Company, who will be able to act immediately after the Death of a Life Assured.

Part 2 – The Trustees

It is possible to appoint individuals (provided they are over 18) or a Trust Company, or a combination of both, to act as Trustees alongside the Settlor(s).

There must be either two additional individuals or one Trust Company appointed as Trustees.

Please provide full details of additional Trustee(s) to be appointed.

Additional Trustee 1

Additional Trustee 2

Given Name/s	<input type="text"/>	<input type="text"/>
Current Residential Address (including street name, town, area code and country)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Telephone Number (including country code)	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>

Please provide the best telephone number and an email address for us to contact you.

If there is insufficient space, please continue on a separate piece of paper, ensuring that you sign and date any additional pages.

Please Note – As Settlor(s), you will have the power to add or remove Trustees during your lifetime.



Part 3 – Trust Name

For example – The [FAMILY NAME] Life Assurance Trust

Part 4 – Beneficiaries

Potential Beneficiaries

The following persons could potentially benefit under the Trust.

1. Any widow or widower or surviving civil partner of the Settlor(s) (unless they are also a Settlor);
2. Any children, grandchildren or remoter issue (i.e. descendants) of the Settlor(s) (including individuals who are adopted, legitimated or illegitimate descendants)

Default Beneficiaries

Insert GIVEN NAMES of the person(s) you wish to benefit and state the share you wish them to have. This must be entered as a percentage and must total 100%.

GIVEN NAME (PLEASE WRITE IN BLOCK CAPITALS)

SHARE

GIVEN NAME (PLEASE WRITE IN BLOCK CAPITALS)	SHARE
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

If there is insufficient space, please continue on a separate piece of paper, ensuring that you sign and date any additional pages.

Please Note

1. The Trustees will have the power to add further beneficiaries in future, provided they are not excluded persons (see below).
2. The Trust will receive only the Death Benefit. The Terminal Illness Benefit and, if applicable to the Policy, the Critical Illness Benefit shall be kept separate from the Trust. In the event these become payable, they shall be paid to the Settlor(s) directly, remaining outside the Trust.
3. If the Trustees have not distributed the Trust Fund before the end of the Trust period (125 years), it will pay out to the Estate(s) of the default beneficiary or beneficiaries (i.e. following their Will(s) or rules of intestacy).

Part 5 – Excluded Persons

Under Inheritance Tax law in certain countries (such as the United Kingdom) the Settlor(s) and, during their lifetime, their spouse(s) or civil partner(s) will be excluded from benefitting from the Trust.

Please insert the GIVEN NAME of any person, charity or organisation you wish to be permanently excluded from benefitting from the Trust.

GIVEN NAME (PLEASE WRITE IN BLOCK CAPITALS)

If there is insufficient space, please continue on a separate piece of paper, ensuring that you sign and date any additional pages.

Please Note – The Trustees shall have the power to exclude further Beneficiaries in future.

IMPORTANT NOTES

Unilife is providing this free Trust Deed for the consideration of Unilife Policyholders, which they may choose to hold their life Policy, and which will receive the proceeds of that Policy in the event of a death claim.

The tax treatment of any benefits payable will depend on tax regulations in force at that time. Policyholders should be aware that tax legislation may change over time and should therefore regularly review their circumstances accordingly.

Unilife does not provide legal, financial or tax advice and we recommend that Policyholders consult with their professional advisers to fully understand the benefits and consequences of this Trust Deed for their specific circumstances, particularly if they are in any doubt as to the extent to which Policy proceeds may be liable for any tax.

It is the responsibility of the Policyholder/Trustees to register/notify the relevant tax and/or other authorities of the creation of the Trust, where applicable.



The Letter of wishes is intended to explain the aims you had in mind when setting up the Trust, your family background, other relevant circumstances and the principles which you think are relevant.

Using the space below, please make a list of the wishes you would like the Trustees to bear in mind when exercising their powers. We will draft these into a formal Letter of Wishes to send to you for your signature as a supplement to the Trust Deed.

The Declaration of Trust confers discretionary powers on you and I appreciate that I/we cannot fetter your discretion or determine the way in which you exercise your powers. In the hope that this may be of help to you in exercising your discretionary powers within the Declaration, but without imposing any other binding obligations on you or seeking to prevent you from acting as you think best in light of changing circumstances, I/we would ask you to have regard to my wishes expressed below.

Guidance Notes

(shall not be used in the construction of the Letter of Wishes or form any part of it)

Insert here what you believe is the main purpose of your Trust.

For example – “To provide for my children throughout their education.”

*If applicable, include details of any of the following:
The priority you would prefer to among your beneficiaries; whether certain beneficiaries should only receive funds in the case of death of all of your children; or whether your spouse/civil partner takes a special position.*

For example – “My wife should take priority over all other beneficiaries.”

If applicable, include details of factors you would like considered by the Trustees when dividing funds between a class of beneficiaries.

For example – “My children should receive 50% of the total and this should be divided equally among them.”

Overall aims of the Trust

Priority among beneficiaries

Principles of selection among beneficiaries and factors to be considered

If there is insufficient space, please continue on a separate piece of paper, ensuring that you sign and date any additional pages.



Letter of Wishes (continued)

To be completed by the Policyholder(s)

Guidance Notes

(shall not be used in the construction of the Letter of Wishes or form any part of it)

If applicable, include details for how you wish funds to a minor beneficiary to be treated.

*For example –
“My children should not receive their share of the funds until they are aged 18.”*

If applicable, include details of factors you would like considered if any of your beneficiaries are divorced.

*For example –
“If any of my children are divorced, I would not wish for any funds to be transferred to their former spouse.”*

Insert the details of any particular people you would want the Trustees to consult with.

Details of professional advisers you would wish to be consulted should also be included here.

Ages at which beneficiaries should receive funds

Spouses or civil partners of beneficiaries, particularly with reference to divorce

Consultation

If there is insufficient space, please continue on a separate piece of paper, ensuring that you sign and date any additional pages.

