

Letter of Authority



Adviser Firm Details		Date:	
Hartey Wealth Management Ltd Hilliard's Court Chester Business Park Chester CH4 9QP	Tel No:	01244 659659	
	Email Address:	info@harteywm.co.uk	
	Agency Code:		
	FRN:	593740	

Policy Holder Details			
Policy Holder 1 Name:		Date of Birth:	
Policy Holder 2 Name:		Date of Birth:	
Address:			
Postcode:		Tel No:	
Contact Tel No:		NI No:	

Instructions	
To (Enter name of Product Provider):	
I/We Authorise/Appoint:	Hartey Wealth Management Ltd
Instructions: Please tick and complete PART A if requesting policy information only. OR Please tick and complete PART B if requesting appointment of a new Financial Adviser.	

Letter of Authority PART A: Request for policy information only

<input type="checkbox"/>	PART A: To obtain policy information only. This will entitle your Adviser to receive information on policies identified in part C.
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Please specify the type(s) of information required by selecting either one or both options below as required. If both boxes are left blank your instruction may be delayed.

<input type="checkbox"/>	Ticking this box will enable your Adviser to receive general policy information.
<input type="checkbox"/>	Ticking this box will enable our Adviser to receive Adviser charges and commission information due from this date forward.

Note: This authority will remain in place until I/we cancel it in writing.



Chester Office: Hilliards Court, Chester Business Park, Chester CH4 9QP **Tel:** 01244 659659
Oswestry Office: 9-11 Salop Road, Oswestry, Shropshire SY11 2NR **Tel:** 01691 654613
Email: info@harteywm.co.uk **Fax:** 01244 679746 www.harteywm.co.uk
Registered in England and Wales No. 8288660 Registered Office: Hilliards Court, Chester Business Park, Chester CH4 9QP. Hartey Wealth Management Ltd is authorised and regulated by the Financial Conduct Authority

Letter of Authority: Part B – Request for appointment of a new Financial Adviser

LOA PART B

Note: This authority will remain in place until I/we cancel in writing.

In respect of all policies detailed in Parts C, I/we understand that this will involve the ongoing authority for my/our new Adviser to:

- Obtain policy information and request the transfer of servicing rights;
- Be responsible for giving financial advice;
- Provide ongoing servicing in respect to all policies detailed below in Parts C.

This authority will remain in place until I/we cancel it in writing:

I/we further instruct that the payment of remuneration payable under my/our policies to my/our new and previous Financial Advisers should be as detailed below.

Adviser Commission (Renewal/Trail)

I/We confirm the transfer of any ongoing commission to my/our new Adviser and they have explained the services will be provided in return for this payment.

(Please note, if this is not confirmed by ticking this box the renewal/trail commission will be stopped.)

Outstanding Initial Adviser Charges

(Please select one of the following when Initial Adviser Charges are still due to your previous Adviser and being paid for through your policy (ies):

Outstanding Initial Adviser Charges to my/our previous Adviser will be stopped.

Outstanding Initial Adviser Charges due to my/our previous Adviser will continue to be paid. (Some product providers may not support this option.)

(Please note, if you are no longer planning on paying for your charges in this way you will need to contact your previous Adviser to discuss settling any outstanding charges. Please also discuss legal implications of this action. As your appointed Advisers, we will charge you for your outstanding existing charges.)

Ongoing Advisers Charges

Any ongoing Adviser charges (deducted from my/our policies) to be paid to my/our previous Adviser will be stopped.

Ongoing Adviser charges (deducted from my/our policies) to be paid to my/our new Financial Adviser are to remain at the same level and frequency as those paid to my/our previous Adviser.

The current level of ongoing Adviser charges have been fully discussed and agreed with my/our new Adviser.

Adviser charge amount

Frequency

Note to Adviser: Any variance in ongoing Adviser charges from those paid to the previous Adviser will need to be disclosed and advised separately.

Please note, separate Policy Owner consent will be required to apply revised Adviser charges.

Please note that the above instructions will apply to all policies indicated in PART C, plus any other policies under my name that are not mentioned.

Please tick Box C (*Basic Policy information may be sent or made available online to your new Financial Adviser on receipt of this Letter of Authority.

C	<input type="checkbox"/>	Specific policy(ies) only – numbered as follows:	Policy Type	Policy Number	Policy Type	Policy Number

Signatures of all policy owners (inc. guarantee (s), assignee (s) & trustee (s) where appropriate):

Signature:		Full name:		Role:		Date:	
Signature:		Full name:		Role:		Date:	
Signature:		Full name:		Role:		Date:	
Signature:		Full name:		Role:		Date:	