

LETTER OF AUTHORITY

Full Name: _____
(first client)

Date of Birth: _____

Full Name: _____
(second client)

Date of Birth: _____

Address: _____

_____ (Post Code)

Date: ____/____/____

TO WHOM IT MAY CONCERN

I/We have appointed Independent Advisers (Scotland) Ltd, as my/our Financial Advisers. Please accept this letter of authority as my/our authority and respect for you to provide Independent Advisers (Scotland) Ltd with any information they may request from you with regards to my/our business, investment, insurance, banking, mortgage, pension or other financial arrangements.

Independent Advisers (Scotland) Ltd is the servicing agent for my/our policies and I would be grateful if you could amend your records accordingly. Please forward all copies of further correspondence to Independent Advisers (Scotland) Ltd.

Many thanks in advance for your help.

Yours faithfully,

(signature) (date)

(name in block capitals)

(signature) (date)

(name in block capitals)

Client Ref. No:	_____ - _____	<i>Please quote on all correspondence</i>
Practitioner:	_____	
Practice Address:	Independent Advisers (Scotland) Ltd 81 St Vincent Street GLASGOW G2 5TF	
Telephone Number:	<u>0141 221 4442</u>	
Fax Number:	<u>0141 221 4482</u>	