

# Crossman Trust Company Limited

Please complete all of the following sections as appropriate in order that your application for Crossman to act as a Protector of a settlement (trust) can be processed. The information that you supply may be referred to our lawyers in the Isle of Man (together with any additional commentary following further communication with you). If your enquiry concerns an employee benefit trust, please ensure that section 13 below is completed and the additional information sought is supplied.

## 1. TYPE OF TRUST

Please indicate the type of trust that you wish Crossman to be the Protector of:

Interest in Possession	<input type="checkbox"/>	Fixed Interest	<input type="checkbox"/>
Accumulation and Maintenance	<input type="checkbox"/>	Purpose	<input type="checkbox"/>
Discretionary – Family	<input type="checkbox"/>	Discretionary – Corporate	<input type="checkbox"/>

**Please attach to this questionnaire a copy of the Trust Deed of any existing settlement which is already in being or that of any proposed settlement.**

## 2. SETTLOR

Please state for the settlor of any existing or proposed settlement (if more than one, please copy and complete as appropriate the additional sheet at the rear of this application)

<b>Title:</b> (Mr/Mrs/Ms/Other)	<input type="text"/>
<b>First Name:</b>	<input type="text"/>
<b>Middle Name(s):</b>	<input type="text"/>
<b>Surname (or company name):</b>	<input type="text"/>
<b>Date of birth</b>	<input type="text"/>
<b>Current Permanent Address:</b>	<input type="text"/>
<b>Telephone Number:</b>	<input type="text"/>
<b>Facsimile Number:</b>	<input type="text"/>
<b>Email Address:</b>	<input type="text"/>

# Crossman Trust Company Limited

## 3. BENEFICIARIES

Please state for each beneficiary (of an existing or proposed settlement), whether the beneficiary is specifically referred to by name or otherwise, the following (additional sheets, should they be required, are available at the rear of this application)

**Full Name**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor**

**Full Name**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor**

**Full Name**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor**

# Crossman Trust Company Limited

**Full Name**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor**

**Full Name**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor**

**Full Name**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor**

# Crossman Trust Company Limited

## 4. BENEFICIARIES (GENERAL)

Should the Trust Deed of the existing or proposed settlement refer to those forming the Class of Beneficiaries in general terms, e.g. the beneficiaries shall be the Settlor, his/her spouse, their children and descendants or alternatively, for instance, those persons not for the time being resident or ordinarily resident in the Isle of Man, would you please give appropriate details as per 2 and 3 above.

## 5. DISCRETIONARY TRUSTS

The nature of a Discretionary Trust is such that the Trustee(s) usually has full discretion as to the distribution of any income or capital to one or more of the potential beneficiaries. You may already have provided in relation to an existing trust or wish to provide in relation to any new settlement a Letter of Wishes indicating the reason(s) why you have or are seeking to create this type of trust and the approach that you would like the trustees to consider when formulating any decision. Please note that a Letter of Wishes is not legally binding upon the Trustee(s). In order to assist Crossman in its role as Protector, a copy of any Letter of Wishes should be provided.

**Is a Letter of Wishes attached?**  
(Please tick box as appropriate)

**YES**  **NO**

**If not, will a letter be provided in the future?**  
(Please tick box as appropriate)

**YES**  **NO**

(Note: Unless the above tick boxes are completed, we will be unable to assist you further)

# Crossman Trust Company Limited

## 6. ROLE OF THE PROTECTOR

For an existing settlement, the role of the Protector will be specifically outlined within the Trust Deed, a copy of which you will be supplying (see 1 above). If a new settlement is to be created, please indicate by ticking the appropriate box below, those powers and function(s) you are seeking Crossman, as Protector, to fulfil and which are drafted in the proposed settlement's Trust Deed:

- |  |                          |
|--|--------------------------|
| The ability to veto any reserved powers of the Settlor                           | <input type="checkbox"/> |
| Appointment and removal of Trustee(s)  | <input type="checkbox"/> |
| Approval of contracts in which a Trustee(s) may have a beneficial interest       | <input type="checkbox"/> |
| Approval of Trustee(s) remuneration  | <input type="checkbox"/> |
| To make or approve additions to or exclusions from the Class of Beneficiaries    | <input type="checkbox"/> |
| To make or approve appointments of income or capital to beneficiaries            | <input type="checkbox"/> |
| To make or approve amendments to the administrative provisions of the Trust Deed | <input type="checkbox"/> |
| To change the Proper Law of the Trust  | <input type="checkbox"/> |
| To enforce the Trust by legal proceedings  | <input type="checkbox"/> |
| To settle questions or disputes concerning the administration of the Trust       | <input type="checkbox"/> |
| To give or obtain tax advice for the Trust                                       | <input type="checkbox"/> |
| To undertake periodic reviews of the trust administration                        | <input type="checkbox"/> |
| To approve the Trustee(s) accounts   | <input type="checkbox"/> |
| To appoint additional protectors   | <input type="checkbox"/> |

If the function concerned is not included in the above list, please stipulate one or more additional functions as appropriate

# Crossman Trust Company Limited

## 7. ASSETS ALREADY SETTLED

If the settlement to which Crossman is to be Protector has been in existence for some time, would you please provide:

- A. A copy of any accounts which have been formally approved by the present Trustee(s).
- B. A copy of any management accounts which have been prepared since the trust's inception or since the Trustee(s) last approved any accounts.
- C. Details of any investment portfolio or copies of any investment portfolio reports and details of any other income and/or gains, e.g. bank interest, in the absence of any accounts having been prepared.

## 8. ASSETS TO BE SETTLED

It is usual to settle a nominal amount of say £100 to set up a trust and to add further funds/assets at a later date.

Please specify the amount and currency of any initial sum to be settled into the trust you are seeking to be established.

If it is proposed that the trust is established with specific assets, e.g. shares in a company, and/or to receive further funds/assets in the future, please give details

# Crossman Trust Company Limited

## 9. SOURCE OF FUNDS

Please give details of the source of funds/assets to be introduced into the trust, providing proof, where necessary or relevant, in the form of written documentation or testimony.

## 10. PROFESSIONAL ADVICE

A trust involves the creation of legal relationships that will necessarily affect the ownership and disposition of the property to be settled. If you are unsure as to how this may affect you or your intentions in respect of such property, you should seek independent professional advice.

Furthermore, you are responsible for your own tax affairs and should therefore take suitable professional advice as to the tax implications and efficiency of what you are proposing in relation to the trust and its activities and make any suitable declarations to your own tax authorities as and when appropriate.

This may require you to seek independent professional advice.

Should you wish us to introduce you to an independent tax or other adviser in return for a fee, which will need to be agreed between you and the adviser, please indicate below:

**Do you require details of an Independent Tax or other adviser**  
(please tick box as appropriate)

YES

NO

(Note: You will be responsible for and billed separately by the adviser concerned)

Please select the tick box to indicate your agreement with the following statement.

“I/we confirm that I/we have taken my/our own advice as to the tax treatment and efficiency of the use of the Trust and proposed structure (if any) within which it will operate and that I/we understand my/our obligations in relation to the making of any suitable tax or other return(s) in my/our own jurisdiction (or elsewhere as the case may be).”

(Note: If you fail to select the tick box, then we will unfortunately be unable to process your application any further)

**Please provide a copy of any tax advice issued in respect of the establishment of the existing or proposed settlement.**

## 11. DUE DILIGENCE (“KYC”)

Crossman Trust Company Limited is licensed as a Corporate Service Provider by the Isle of Man’s Financial Supervision Commission. In order to comply with our licensing requirements and those of the Anti-Money Laundering Code 1998, it is imperative that we hold certain information and documentation on our files, i.e. KYC.

# Crossman Trust Company Limited

We will therefore require you to supply us with the following documentation for all the parties named on this Protector Questionnaire.

- Original/Certified Copy Passport\*
- Original/Certified Copy Utility Bill\*\* - No more than 3 months old
- Original/Certified Copy Bank Statement\*\* - No more than 3 months old
- Original/Certified Copy Credit Card Statement\*\* - No more than 3 months old
- Bank Reference
- Professional Reference

(Note: Documents marked with an “ \* ” should be certified by a Notary Public. Those documents marked “ \*\* ” may be certified by an Accountant, Solicitor or Bank)

The following certification should be attached to a passport.

Having seen the individual and the identification document at the same time, I certify this is a true copy and the photograph is a reasonable likeness	
Signature .....	Date ...../...../.....
Name .....	
Position .....	
Company.....	
Address .....	
.....	

Utility bills and bank or credit card statements should be certified as follows.

I hereby certify this is to be a true copy of the original	
Signature .....	Date ...../...../.....
Name .....	
Position .....	
Company.....	
Address .....	
.....	

(Note: The address of the person/banking institution certifying any copies of the documents in question may be evidenced by an appropriate formal stamp)

# Crossman Trust Company Limited

## 12. COSTS

Please refer to Protector – Initial and Annual Costs for details of Crossman’s Standard Terms and Conditions and costs in relation to the services it renders as a Protector.

## 13. DISCRETIONARY TRUSTS - CORPORATE

If you are seeking Crossman to be the Protector of a discretionary trust established to benefit employees would you please provide the following:

- A Certified copy of the company’s Memorandum and Articles of Association
- B Certified copy of the company’s Certificate of Incorporation
- C The names and shareholdings (if any) of the company’s directors and other officers
- D Certified copy of the company’s last audited and Board of Directors approved financial statements.
- E Details of the company’s bankers.

(Please note that Due Diligence/KYC may be required on the members of the Board of Directors, other officers and where the company is privately owned, on any shareholder (not an officer of the company) owning more than 10% of the company’s shares).

- o0o -

I/We hereby confirm the above details.

**Signature:**

**Name in Full:**

**Date:**

**Signature:**

**Name in Full:**

**Date:**

# Crossman Trust Company Limited

## CONTINUATION SHEET

Please copy this page as many times as is appropriate and specify in what capacity the details are provided for the person or party concerned.

This Continuation Sheet is being completed on behalf of:

**A Settlor**

**A Beneficiary**

(please tick box as appropriate)

**Title:** (Mr/Mrs/Ms/Other)

**First Name:**

**Middle Name(s):**

**Surname:**

**Former Name:**

**Date of birth**

**Current Permanent Address:**

**Relationship to Settlor:**

**Telephone Number:**

**Facsimile Number:**

**Email Address:**