POLICY NIMBER: 13735

DOLPHIN TRUST GMBH Change/Appointment of Trustee Form

This form is for use where a new trustee is appointed to the exclusion of (i.e. in substitution for) a former trustee or a trust is declared over the Loan Notes.

Section A: Client Details

Name	SIMON
Any Middle Names (if relevant)	
Surname	COLE
Office/Home Address	Flat 2, Westfield Oaks, 15 Westfield Avenue Hayling Island. PO11 9AQ
Phone number	07388 420335
E-mail Address	simonpcole@outlook.com

Section B: Former Trustee Details (where applicable)

Pension/Administrator Name	Rowanmoor
Scheme Name	Hayling Oaks Ltd Executive Pension Scheme
Trustee Name	Rowanmoor Trustees Limited
Date of cessation of trusteeship	18 November 2019

Section C: Incoming Trustee Details

Pension/Administrator Name	Cranfords Trustees Limited
Scheme Name	Hayling Oaks Ltd Executive Pension Scheme
Trustee Name	Cranfords Trustees Limited

Attach signed proof of change of trust mandate/proof of appointment - tick to confirm	Х	(

Total Investment Amount (principal)	£ 67000
(or attach schedule of client	t details)

DOLPHIN TRUST GMBH Change/Appointment of Trustee Form

Section D: Bank details for new Trustee

Your bank details are required to ensure the return of capital & interest

Bank Name & Address	AIB BANK PLC
Bank Sort Code	23-83-96
Bank Account Number	04690077
Name/s on Bank Account	Hayling Oaks Ltd Executive Pension Scheme
SWIFT	AIBKGB2L
IBAN number	GB87AIBK23839604690077

Section E: Signature

I/We, the first below undersigned, confirm that I/we am/are the newly appointed trustee to the pension scheme named above, to the exclusion of the former trustee(s) named above and I/we hereby request you to register my/our name as the registered holder of the relevant Loan Notes for the investments specified above/attached, and to update the payment details for the returns from the investments in accordance with this form. I/we are responsible for any inaccuracies or omissions from the data herein or attached hereto.

I/we understand that you may need to complete additional due diligence processes around my/our appointment and may need to contact the underlying client(s), and I consent to such processes and contacts.

Signature:	Print Name:	Date:
DocuSigned by:		
Dia	Paul Davies	7/12/2019
ED6F475BAF57472		

[For use when the appointment is of a new trustee for the first time]

I/We the below undersigned confirm the above appointment, as beneficial owner of the Loan Notes.

Print Name:	Date:	
Simon Cole	7/14/2019	

Contacts

For administrative queries please email dolphin@whitesfundservices.com or call 02030 112775.