Trust Formation

Instruction to Richmond Fiduciary Group Limited ("RFGL")

"Trustee" means any corporate or individual trustee provided by RFGL
"Trust" means the trust to be created

1. Proposed Name of Trust

2. Proposed Purpose of Trust

Please give a full description of the intended purpose and nature of the Trust.

3. Type of Trust

Is the Trust to be discretionary? Yes ☐ No ☐

If the Trust is not to be discretionary please give full details of the proposed beneficial entitlement

4. Initial Settled Funds

Please give details of the first assets to be settled into the Trust

5. Other Assets

Please give a full description of additional assets to be settled into or loaned to the Trust including their present location, owner and how and when they are to be transferred or loaned to the Trust

6. Settlor

It is important that RFGL holds details of the ultimate settlor and should you be acting as settlor on behalf of any other party please provide details on a separate sheet and tick here: ☐

Please provide the following details of the settlor:

Name:

Address:

Full CDD Provided? ☐

Occupation:

Fax:

Phone:

Email:

If the settlor wishes to be granted any administrative or other powers please detail them below, to be discussed and agreed with RFGL prior to establishment:

Please note that the settlor is required to complete an Individual Profile form (see http://richmondgroup.uk.com/documents/fiduciary/individual-profile-form) which also confirms the CDD required. Should the settlor or beneficiaries/protector/enforcer be a corporate entity please ensure that corporate due diligence is provided in accordance with our CDD collection guide.

7. Trust Beneficiaries

Please complete the following with any class(es) of beneficiaries to be included within the Trust Instrument:-

(7.a) Classes of Beneficiaries:

(i.e. the children of... or the children and the descendants issue of... etc.)

Please complete the following with any named beneficiaries to be included within the Trust Instrument:-

(7.b) Named Beneficiaries:

Name: Full CDD Provided? ☐

Name: Full CDD Provided? ☐

Name: Full CDD Provided? ☐

Name: Full CDD Provided? ☐

Name: Full CDD Provided? ☐

Please note that each beneficiary is required to complete an Individual Profile form (see http://richmondgroup.uk.com/documents/fiduciary/individual-profile-form) which also confirms the CDD required.

Child(ren)'s Due Diligence Declaration

(7.c)

Children may on occasion be named beneficiaries of a trust where there is no intention for them to benefit for the foreseeable future. Please note that in some circumstances we may require additional information, however where they are minors and reside with you at your permanent address, due diligence can often be provided at a later date (however this must be before they benefit from the trust fund). Please consider if applicable to your personal circumstances and if so complete the below:

Full name

I declare that the person(s) noted below are my legal children who reside with me at my permanent residential address as provided above. I further declare that they do not have any independent method of verifying their address and are **minors or otherwise in full time education.**

Child 1 Full Name

Date of Birth

Passport Number

Country of Tax Residency

Tax Identification Number*

Child 2 Full Name

Date of Birth

Passport Number

Country of Tax Residency

Tax Identification Number*

Child 3 Full Name

Date of Birth

Passport Number

Country of Tax Residency

Tax Identification Number*

Child 4 Full Name

Date of Birth

Passport Number

Country of Tax Residency

Tax Identification Number*

Child 5 Full Name

Date of Birth

Passport Number

Country of Tax Residency

Tax Identification Number*

*Tax Identification Number e.g. National Insurance Number, US TIN or Tax Reference Number

8. Protector (or Enforcer in the case of a purpose trust)

Is a protector required? Yes ☐ No ☐

If Yes, please provide the following
(8.a)
Name:

(8.b) What arrangements are to be put in place for the appointment of New or Replacement Protectors:

(8.c) Please give details of Protector powers to be included in the Trust

Instrument to add beneficiaries?	Yes ☐	No ☐
To exclude beneficiaries?	Yes ☐	No ☐
To change Trustees?	Yes ☐	No ☐

(8.d) Please include any specific powers to be included in the Trust Deed:

Please note that the protector/enforcer is required to complete an Individual Profile form
(see http://richmondgroup.uk.com/documents/fiduciary/individual-profile-form) which also confirms the CDD required.

9. Accounting

RFGL are required by local legislation to prepare annual financial statements for all Trusts that we manage. Please provide guidance, in respect to these accounts, as detailed below:

(a) Preferred accounting currency Sterling ☐ Eur ☐ US$ ☐ Other ______

Preferred accounting year end ___/___/______ DD/MM/YYYY

10. Investment Manager

The Trustees, where appropriate, will appoint a professional investment manager/advisor (“Investment Manager“). If there is any preference as to who should be appointed, please give details below:

Name:

Company:

Address:

Phone:

Email:

11. Settlor(s) Declaration

I/we confirm that the information supplied by me/us and contained herein is true and accurate.

I/we confirm that in addition to me/us, those mentioned in section 7.c should be duly noted as potential beneficiaries of the Trust and the Trustees should have the ability under the terms of the Trust Instrument to add and/or remove beneficiaries as the Trustees in their discretion may see fit, provided always that the Trustees have discretionary powers.

It is my/our intention to place in the proposed trust the assets detailed in section 4 and 5 to be administered by the Trustees under the terms and conditions of the Trust Deed. I/we hereby declare that the said assets are legally and beneficially owned by me/us and that I/we are financially solvent at the date hereof and that such assets do not in any way represent the proceeds of crime or money laundering, which for this purpose means arising as a result of any crime committed in any jurisdiction.

I/we confirm that I/we may wish the Trustees to consider the appointment of an Investment Manager to the Trust. My/our recommendation in this respect is detailed in section 10.

In your capacity as Trustees of the proposed Trust you have drawn my/our attention to the requirement under Guernsey law for Trustees to keep accurate Trust accounts and records.

I/we confirm that I/we shall meet the costs of establishment of the Trust and all initial and future fees as set out in RFGL's Scale of Fees, a copy of which has been provided to you. Furthermore, I/we note that administration fees in respect of the Trust's management may be charged on a time-spent basis and that fees will be charged for the preparation of annual financial statements. I/we confirm that all costs including for the avoidance of doubt all fees and disbursements due, shall be met directly from the trust fund and if insufficient liquid funds are available to do so, I/we shall meet such costs as and when arising together with the costs of any disbursements incurred in connection with Trust undertakings.

I/We confirm that the Trustees, pursuant to the trust instrument, may at any time use the assets of the Trust to settle outstanding fees and disbursements due to RFGL. In requesting the above-mentioned services, I/we shall provide certified appropriate verification documents as a means of formal identification and proof of residential address. I/we also confirm that I/we have been recommended to seek independent professional advice in respect of entering into the above-mentioned arrangements, and that I/we are not contravening any tax laws whatsoever that I/we are aware of. I/we also acknowledge that no tax advice has been offered by, or received from the Trustees and I/we indemnify release and discharge the Trustee of the Trust, its agent, directors, officers and the directors and officers of its agent and each of them and their respective successors, assigns, heirs and personal representatives entirely in respect to any tax consequences whatsoever which may affect the Trust, the Settlor(s) or all or any beneficiaries in respect to the creation and administration of the Trust.

I/We confirm that I/we will at all times act in accordance with RFGL's standard terms and conditions, a copy of which has been provided to you, and is available at richmondgroup.uk.com and I/we acknowledge that such terms and conditions may change from time to time.

Name: ______________________________

Signed: ______________________________ Date: ______________________________

Name: ______________________________

Signed: ______________________________ Date: ______________________________

Guernsey Trust Formation
Client Checklist

To avoid delays in processing your application please check that the below documentation has been returned, either prior to, or is being submitted together with this Guernsey Trust Formation Instruction.

		Tick
a.	Guernsey Trust Formation Instruction, fully completed and signed by Settlor(s)	☐
b.	Individual profile forms completed, and due diligence submitted in relation to the parties identified in sections 6, 7 and 8 in accordance with the Individual or corporate requirements per the CDD Collection Guide	☐
c.	Structure chart to be provided if the Trust will form part of a structure involving 3 or more entities	☐
d.	Source of Funds/Wealth Form fully completed and signed by all parties providing funding to the Trust, plus documentary evidence if applicable	☐
e.	Self-Certification Forms – Individual/Company forms completed and returned as applicable	☐
f.	Terms and Conditions of Business – confirmation that they have been received and reviewed	☐
g.	Scale of Fees – confirmation that they have been received and reviewed	☐
h.	Tax Advice/Professional Advice – confirmation that legal, tax and/or professional advice has been received and a copy has provided to RFGL	☐

Comments
If you wish to add any comment or explanation in relation to the above please provide below:-

Signed

Name: ______________________________ Name: ______________________________

Signature: ___________________________ Signature: ___________________________

Date: ______________________________ Date: ______________________________

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