

Dear Sirs,

I hereby appoint

Heritage Financial Services of Newnham House, 90A Pyle Street, Newport, Isle of Wight PO30 1UJ, who are authorised and regulated by the Financial Services Authority (SIB No. 185508), as my Independent Financial Adviser.

To enable them to advise me, I give authorisation to: -

1. Provide them with any information they may request regarding the under mentioned contract(s).
2. Only where agencies apply: Transfer the under mentioned contract(s) to the agency of Heritage Financial Services and pay them any renewal commission for servicing this/these contract(s).
3. To avoid error or omission, if I hold any policies in addition to those listed below, they are to be included in the authority granted by this letter.

I understand that, other than the specific areas that they give written advice on, Heritage Financial Services are not responsible for previous advice or subsequent action or inaction concerning these policies.

Please enter details below
A SEPARATE FORM SHOULD BE USED FOR EACH COMPANY

Policy Number

Contract Type

Policy Number

Contract Type

Signature.....

Date.....