

Executor's Payment Instruction

Please use this instruction to make a payment from the deceased's GIA and Novia ISA as detailed below. Please complete all required information in capitals using a black pen and return the wet-signed original either by post to Wealthtime Client Services, PO Box 4328, Bath, BA1 0LR or by secure email.

Deceased Client De	tails		
Investor number:			
Title:	Surname:		
Forename(s):			
Date of birth: (dd/mm/yyyy)	National Insurance number:		
Payment Instruction	าร		
Payment to an account	in the name(s) of the executor(s)		
Name of bank/building socie	ety:		
Account name:			
Branch sort code:	Account number:		
Payment to an account in the name(s) of solicitors – I can confirm that the account details are included with this instruction on the solicitors' headed paper Payment to another Wealthtime Product Wrapper in the name of:			
Product Wrapper number:			
If you have any additional or alternative instructions please specify below:			



Executor Declaration

I/We the undersigned, as executor(s), request that the proceeds from the sale of Assets held within the estate for the named client be paid as detailed in this instruction. Please note that we require a certified copy of each executor's passport or driving licence in order to verify their signature.

Signature of execut	IOF	
Executor signature:		Date (dd/mm/yyyy):
Executor name		
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