



Trust Registration

Thackray Williams

Trust Details:

Name of Trust:	
Date of Trust	
Law Governing Trust:	
Has the Trust Acquired UK land or property since 6 October 2020?	
Non UK Trust - Is the trust registered on the trust register of any other EEA country?	
Does the Settlor benefit from the trust's assets?	

Settlor Details:

Full Name of Settlor:	
Date of Birth:	
Date of Death:	
Address:	
NINO:	
UTR:	
Nationality:	
Country of Residence	

N.B. The Settlor is the person who created the Trust. If the Trust was created by Will the Settlor will be the Deceased.

Trustees' Details:

INDIVIDUAL TRUSTEE 1:-

Name:	
Date of Birth:	
Address:	
NINO:	
UTR:	
Email Address:	
Telephone Number:	
Nationality:	
Country of Residence:	

INDIVIDUAL TRUSTEE 2:-

Name:	
Date of Birth:	
Address:	
NINO:	
UTR:	
Email Address:	
Telephone Number:	
Nationality:	
Country of Residence:	

CORPORATE TRUSTEES:-

Name:	
Address:	
UTR:	
Email Address:	
Telephone Number:	

Please provide a copy of each Trustees' passport or driving license along with the completed questionnaire.

Beneficiaries Details:

ORIGINAL BENEFICIARY 1:-

Full Name:	
Date of Birth:	
Address:	
Telephone Number:	
Email Address:	
Nationality:	
Country of Residence:	
Does Beneficiary have mental capacity?	
Has a vulnerable person election been made? (Specify date)	

ORIGINAL BENEFICIARY 2:-

Full Name:	
Date of Birth:	
Address:	
Telephone Number:	
Email Address:	
Nationality:	
Country of Residence:	
Does Beneficiary have mental capacity?	
Has a vulnerable person election been made? (Specify date)	

ORIGINAL BENEFICIARY 3:-

Full Name:	
Date of Birth:	
Address:	
Telephone Number:	
Email Address:	
Nationality:	
Country of Residence:	
Does Beneficiary have mental capacity?	
Has a vulnerable person election been made? (Specify date)	



HMRC TRUST REGISTRATION INFORMATION

ORIGINAL BENEFICIARY 4:-

Full Name:	
Date of Birth:	
Address:	
Telephone Number:	
Email Address:	
Nationality:	
Country of Residence:	
Does Beneficiary have mental capacity?	
Has a vulnerable person election been made? (Specify date)	

Beneficiary Added by Deed of Addition Dated: DD MM YYYY:

(List all deeds of addition) Please leave empty if not applicable.

Full Name:	
Date of Birth:	
Address:	
Telephone Number:	
Email Address:	

Trust Assets:

If the Trust owns Property or Land

(a) Address of property	
(b) Current value	
(c) Does the trust own 100% of the property or land?	
(d) What proportion of the property or land does the trust own?	
If the trust owns shares list the shares and value, indicate if quoted or unquoted:	
If the trust owns an insurance policy or investment provide details including current value, if any:	



Your Personal Circumstances

You may also wish to consider a review of your own personal affairs. If you would like us to get in touch with you about any of the following, then please tick the relevant boxes and provide us with your contact details. A member of the team will be in touch.

- Lasting Power of Attorney
- Wills
- Declaration of Trust
- Inheritance Tax Planning
- Asset Protection
- Ongoing Care Needs

Preferred Contact Details

The information listed above is a true and accurate representation of the information we hold on file for the listed Trust.

Sign: _____ Date: _____

Print
Name: _____