PRISM
WEALTH MANAGEMENT

Letter of Authority – Client Authorisation

☐ Please accept this letter as my authority to release full policy information and transfer the servicing rights for all accounts, policies, or scheme benefits. For the avoidance of doubt, this authority relates to **all** accounts that I may hold with you and is not restricted to those entered.
I/we confirm the transfer of any renewal/trail commission / initial and ongoing fees to my/our new Adviser and they have explained the ongoing services that will be provided in return for this payment.

☐ Please accept this letter as my authority to request information only regarding all policies or scheme benefits that I hold with yourselves, not to transfer servicing rights. For the avoidance of doubt, this authority relates to **all** accounts that I may hold with you and is not restricted to those entered.

APPOINTED REPRESENTATIVE:
Prism Wealth Management Ltd
The Chestnuts, Lower Road
Little Hallingbury
CM227RA
FCA: 1042389

Principal Firm
Best Practice Group Ltd
Broadlands Business Campus, Langhurst Wood Road
Horsham, Essex
RH124QP
FCA: 223112

Provider	
Client Name	
Date of Birth	
National Insurance Number	
Client Address	
Policy/Account Numbers	All policies including:

In the event of any queries regarding this letter, please contact Megan Norris on:

E: megan.norris@prismwealth.co.uk T: 07940922712

Please provide Prism Wealth Management Ltd and Best Practice Group Ltd (part of Benchmark) with any information requested (Prism Wealth Management Ltd is an appointed representative of Best Practice Group Ltd).
Thank you for your assistance.

Signed…………………………………….. Date………………………………

Signed………………………………….. Date………………………………