

## Deed of Appointment and/or Retirement of trustees

**This deed may be used for policies held in trust under a trust deed issued by::**

- Canada Life Limited
- Canada Life International Limited
- CLI Institutional Limited
- Canada Life International Assurance (Ireland) DAC

The purpose of this deed is to appoint and/or retire trustees (with their consent).

This deed is provided as a draft to be considered by you and your professional adviser. It is provided solely for general consideration.

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### Notes

No fewer than two trustees should remain to administer the Trust.

The deed must be completed by the person(s) who has/have the power of appointment (the Appointor) under the terms of the Trust (this is normally the Settlor but may also be the Trustees – you will need to refer to the Trust deed).



In this deed the singular includes the plural and the masculine includes the feminine (and vice versa) where the context so admits.

**Deed of Appointment**

This Deed is made on the  /  You must date this deed using the date that the last person signs

**By**

- The Appointor(s) named below in Part 1;
- The Continuing Trustee(s) (if any) named below in Part 2;
- The Retiring Trustee(s) (if any) named below in Part 3; and
- The New Trustee(s) (if any) named below in Part 4

**Whereas**

1. This deed of appointment is in addition to and in accordance with the Declaration of Trust (the 'Trust') for the policy (the 'Policy') shown in the Schedule below.
2. The Appointor, the Continuing Trustees (if any) and the Retiring Trustees (if any) are the current trustees of the Trust.
3. The Appointor has the power to appoint new trustees.
4. The Continuing Trustee(s) (if any) want to remain as a trustee.
5. The Retiring Trustee(s) (if any) does not wish to remain as a trustee and wants to be discharged from the trusts created by the Trust.
6. The Appointor would like to appoint the New Trustee(s) (if any) to be a trustee of the Trust to act jointly with him and the Continuing Trustee(s) (if any).

**Now this deed witnesses**

1. The New Trustee(s) (if any) is appointed to act jointly with the Appointor and the Continuing Trustee(s) (if any) as Trustees for all purposes of the Trust.
2. The Appointor agrees to the Retiring Trustee(s) (if any) being discharged from the Trust and from now, the Retiring Trustee(s) (if any) is discharged.

**Schedule**

(Please tick as appropriate)

Canada Life Limited	<input type="checkbox"/>
Canada Life International Limited	<input type="checkbox"/>
CLI Institutional Limited	<input type="checkbox"/>
Canada Life International Assurance (Ireland) DAC	<input type="checkbox"/>

Description of policy(ies)

Policy number(s)

Policy date(s)

**+** Please complete in block capitals and tick small boxes where appropriate

**Part 1 The Appointor(s)**

(full name of Appointor(s))	<input type="text"/>	<input type="text"/>
	of	of
(address)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
	<input type="text"/>	<input type="text"/>

**Part 2 The Continuing Trustee(s)**

(full name of Continuing Trustee(s))	<input type="text"/>	<input type="text"/>
	of	of
(address)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
	<input type="text"/>	<input type="text"/>

**Part 3 The Retiring Trustee(s)**

(full name of Retiring Trustee(s))	<input type="text"/>	<input type="text"/>
	of	of
(address)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
	<input type="text"/>	<input type="text"/>

**Part 4 The New Trustee(s)**

(full name of New Trustee(s))	<input type="text"/>	<input type="text"/>
Nationality	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>
	of	of
(address)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
	<input type="text"/>	<input type="text"/>



Please complete  
in block capitals

**Signatures** In witness the parties have executed this deed on the day and year mentioned above.

**Signed and delivered as a deed by the Appointor**

Print name of Appointor

Signature must be witnessed by an independent person, not party to the deed

Signature of Appointor

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness   
  
Postcode

**Signed and delivered as a deed by the Appointor**

Print name of Appointor

Signature must be witnessed by an independent person, not party to the deed

Signature of Appointor

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness   
  
Postcode

**Signed and delivered as a deed by the Continuing Trustee (if any)**

Print name of Continuing Trustee

Signature must be witnessed by an independent person, not party to the deed

Signature of Continuing Trustee

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness   
  
Postcode

**+** Please complete in block capitals

**Signed and delivered as a deed by the Continuing Trustee (if any)**

Print name of Continuing Trustee

Signature must be witnessed by an independent person, not party to the deed

Signature of Continuing Trustee

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness   
  
 Postcode

**Signed and delivered as a deed by the Retiring Trustee (if any)**

Print name of Retiring Trustee

Signature must be witnessed by an independent person, not party to the deed

Signature of Retiring Trustee

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness   
  
 Postcode

**Signed and delivered as a deed by the Retiring Trustee (if any)**

Print name of Retiring Trustee

Signature must be witnessed by an independent person, not party to the deed

Signature of Retiring Trustee

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness   
  
 Postcode

**+** Please complete in block capitals

**Signed and delivered as a deed by the New Trustee (if any)**

Print name of New Trustee

Signature must be witnessed by an independent person, not party to the deed

Signature of New Trustee

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness

Postcode

**Signed and delivered as a deed by the New Trustee (if any)**

Print name of New Trustee

Signature must be witnessed by an independent person, not party to the deed

Signature of New Trustee

Date

**In the presence of**

Full name of witness

Signature of witness

Occupation of witness

Address of witness

Postcode

Please note that in order to comply with our regulatory obligations we may require documents to verify the identity and residential address of individual policyholders, including trustees. We may use credit reference agency searches to verify the identity and address. Please note this will not affect anyone's credit rating. We reserve the right to ask for further documentation to confirm this.

**+**  
Please complete  
in block capitals

## Data Protection Notice

Any personal information you may provide to Canada Life International Limited (CLI) or CLI Institutional Limited (CLII) as data controller will be treated in accordance with the Isle of Man GDPR and LED Implementing Regulations 2018.

Any personal information that you may provide to Canada Life International Assurance (Ireland) DAC as data controller will be treated in accordance with the Data Protection Act 2018 (DPA).

Any personal information that you may provide to Canada Life Limited (CLL) as data controller will be treated in accordance with the Data Protection Act (as amended).

(CLI, CLII, CLIAI & CLL together will be defined as 'Canada Life' in this notice).

By signing this form you consent to Canada Life using and sharing your personal information as set out in this notice including, without limitation, the processing of sensitive personal data.

If submitting personal information about another person, by signing this form you confirm that you have their consent to provide such information to Canada Life and for their information to be used as set out in this notice.

### Using Personal Information

We use personal information to undertake activities relating to the setting up, administration and renewal of our policies, products and services. This includes processing applications and handling any claims. For the majority of our business we will rely on the performance of our contractual arrangements with you as the legal basis for processing.

We do not use policyholder, member or beneficiary personal data for marketing purposes and we do not make your personal information available to third parties for the purpose of direct marketing.

The nature of our business is to provide investments, life and pensions cover, critical illness, income protection and employer-related group products. To do this we need to use the personal information provided to carry out analysis of actuarial risks (risks of gains or losses), mortality and morbidity risks and pricing. This will be carried out in accordance with the Institute & Faculty of Actuaries' data handling protocols.

We use an underwriting engine to process some applications and quotations which will use an element of automated decision making.

Exceptionally, we may rely on our legitimate interests to process your personal data. When we do, we will demonstrate compelling legitimate grounds for doing so.

For employer-related group insurance products the DPA permits appropriate information about employees to be provided by an employer to an insurer without individual consent (including details of long-term absentees, current and previous claimants, and medical underwriting decisions).

For employer-related group products the DPA permits that members may individually withdraw their consent, in those instances Canada Life will be unable to provide cover for that individual.

When medically underwriting or assessing a claim we will obtain consent from the employee.

### Sharing personal information

We share personal information only on the basis of the purposes for which it was collected. This notice is intended to illustrate the instances where data may be shared. However, we will share your data only for the limited and compatible purposes for which it was originally obtained:

- with other Canada Life group companies including those outside the European Economic Area (EEA);
- with any of our service providers, reinsurers and / or regulators;
- with other insurers and government agencies, including without limitation Her Majesty's Revenue and Customs (HMRC), Department of Work and Pensions (DWP);
- in order to prevent, detect or investigate financial crime including fraud or other criminal activity, we may share your data with other companies (including private investigators), organisations (including fraud prevention agencies and databases), public bodies (including the police) and associations and credit reference agencies;
- we will not share your medical information with anyone other than yourself without your consent except as described in the next bullet point. This includes your employer, spouse, other relatives, friends or your legal or professional adviser. In some circumstances, it may be appropriate to advise your employer about your medical information, for example, to recommend alternative supportive therapy. However, we will seek your consent in such circumstances;
- for employer-related products and services only, some medical information related to underwriting decisions and non-medical information about you necessary for lawful policy and claim administration purposes will be shared with your employer;
- we will not share non-medical information concerning you with your spouse, other relatives, friends or your legal or professional adviser unless you provide your consent to us in writing;
- for insurance related products, with your own doctor or relevant medical professionals; and/or
- in any circumstances if permitted or required to do so by law or if we have your consent to do so.

### International Transfers

Given the global nature of our business, we use third party suppliers and outsourced services (including cloud-based services), which can require transfers of personal information outside of the EEA. In doing so, we will ensure there are contractual

arrangements in place with those organisations who have appropriate organisational and technical measures to protect your personal information.

### Retention of your personal data

We will keep your personal data only for so long as is necessary and for the purpose for which it was originally collected. In particular, for so long as there is any possibility that either you or we may wish to bring a legal claim under this insurance, or where we are required to keep your personal data due to legal or regulatory reasons.

### YOUR RIGHTS AND CONTACT DETAILS OF THE INFORMATION COMMISSIONER'S OFFICE (ICO)

You may have the right to require us to:

- provide you with further details on the use we make of your personal information or your special categories of data;
- provide you with a copy of the personal information that you have provided to us or which we hold;
- update any inaccuracies in the personal information we hold;
- delete any special category of data or personal information for which we no longer have lawful grounds to use;
- cease processing of your personal information that is based on consent, by withdrawing your consent to that particular processing;
- cease any processing based on legitimate interests grounds, unless our reasons for undertaking that processing outweigh any prejudice to your data protection rights; and
- restrict how we use your personal information whilst a complaint is being investigated.

In certain circumstances, we may need to restrict the rights listed above in order to safeguard the public interest (e.g. the prevention or detection of crime), our interests (e.g. the maintenance of our legal responsibilities) and for the performance of our contract with an employer who is the policyholder for employer-related products and services.

### Data Protection Officer (DPO)

If you have any questions, or complaints, in relation to our use of your personal information, you should first contact our DPO, on the details below:

**Canada Life International Limited,  
Canada Life House,  
Isle of Man Business Park,  
Douglas,  
Isle of Man,  
IM2 2QJ**

**CLI Institutional Limited,  
Isle of Man Business Park,  
Douglas,  
Isle of Man,  
IM2 2QJ**

**Canada Life International Assurance (Ireland) DAC,  
Irish Life Centre,  
Lower Abbey Street,  
Dublin 1.**

**Canada Life Limited,  
Canada Life Place,  
Potters Bar,  
Hertfordshire,  
EN6 5BA**  
or by email at: [dpo@canadalife.co.uk](mailto:dpo@canadalife.co.uk).

In the unlikely event that you are dissatisfied with our response, you have the right to take the matter up with the Information Commissioner's Office (ICO), whose addresses are:

**England:** Information Commissioner's Office,  
Wycliffe House, Water Lane, Wilmslow,  
Cheshire, SK9 5AF

**Isle of Man:** Information Commissioner's Office,  
First Floor, Prospect House, Prospect Hill, Douglas,  
Isle of Man, IM1 1ET

**Ireland:** Data Protection Commissioner,  
21 Fitzwilliam Square South, Dublin 2,  
DO2 RD28 Ireland

The full version of our DPN can be found on our website, [www.canadalife.co.uk](http://www.canadalife.co.uk) or is available upon request by calling 0345 6060708.

This DPN is dated 7th September 2018. Any future updates will be made available as described above.



Canada Life Limited, registered in England no. 973271. Registered office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Telephone: 0345 6060708 Fax: 01707 646088 [www.canadalife.co.uk](http://www.canadalife.co.uk) Member of the Association of British Insurers.

Canada Life International Limited, registered in the Isle of Man no. 33178. Registered office: Canada Life House, Isle of Man Business Park, Douglas, Isle of Man IM2 2QJ. Telephone: +44 (0) 1624 820200 Fax: +44 (0) 1624 820201 [www.canadalifeint.com](http://www.canadalifeint.com) Member of the Association of International Life Offices.

CLI Institutional Limited, registered in the Isle of Man no. 108017C. Registered office: Canada Life House, Isle of Man Business Park, Douglas, Isle of Man IM2 2QJ. Telephone: +44 (0) 1624 820200 Fax: +44 (0) 1624 820201 Member of the Association of International Life Offices.

Canada Life International Assurance (Ireland) DAC, registered in Ireland no. 440141. Registered office: Irish Life Centre, Lower Abbey Street, Dublin 1, Ireland Telephone: +44 (0) 1624 820200 Fax: +44 (0) 845 674 0804 [www.canadalifeinternational.ie](http://www.canadalifeinternational.ie) Member of the Association of International Life Offices.

Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Canada Life International Limited and CLI Institutional Limited are Isle of Man registered companies authorised and regulated by the Isle of Man Financial Services Authority. Canada Life International Assurance (Ireland) DAC is authorised and regulated by the Central Bank of Ireland.



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