

Third Party Authority Form

Please complete this form if you would like us to be able to discuss your account with a third party. Please note that we can only provide the third party with information, we will not accept instructions from them. If you did need a third party to act for you, we would require sight of an original or certified copy of a Power of Attorney document and we would need to verify the identity of any Power of Attorney. Alternatively, we can verify a Lasting Power of Attorney through the UK government website. If you wish to register your attorney there, you can be sent a unique code from them, which if supplied to us allows us to verify your attorney is valid without seeing the document. You can get further details at www.gov.uk/view-LPA.

Client Reference Number

Name

Title (Mr/Mrs/Ms/Miss/Other) Surname

Forename(s) (in full)

Address

Postcode

Third party details

Please complete the name and address of the third party you would like us to be able to discuss your account with.

Name

Title (Mr/Mrs/Ms/Miss/Other) Surname

Forename(s) (in full)

Address

Postcode

Telephone

I hereby authorise Baillie Gifford to provide the above named third party with information regarding my Baillie Gifford account. I understand that Baillie Gifford will not accept instructions from the third party and that this authority will remain in place until I choose to revoke it.

Signature

Date

Please note that if you wish to revoke or cancel this authority, we will require written confirmation from you.
