

Deferral of Sub-trust Fund Entitlement on the Aviva Flexible Reversionary Trust

This form is used by the settlor (the person who set up the trust) to request a change to the vesting date for certain segments (sub-trust funds) within their Aviva Flexible Reversionary Trust.

By completing this form, you are asking the trustees to defer when you (or the beneficiary) will become entitled to the specified segments. Only segments with a vesting date after the date of this form can be amended.

Once completed, this form should be retained by the trustees, with the original Reversionary Trust Deed, as evidence of this amendment.

Letter to trustees

To the trustees of														
Trust name														
Bond account number	Α	V							-					
Today's date	D	D	M	M	Υ	Υ	Υ	Υ						
Settlor's name														
Date of trust	D	D	M	M	Y	Y	Y	Y						

Section 1 - Amendments to Schedule B - The Policies

I, the settlor, would like to amend Schedule B of my Flexible Reversionary Trust, detailed above, as follows:

In the table, please specify the segment numbers you wish to defer (for example, "1–50" or "51–100"). Aviva does not assign names or unique identifiers to segments—simply use the numbers of the total number of segments and enter the revised vesting date for each segment range you wish to defer.

The "For trustee use only" column is for the trustee to add their own identifier should they so wish. For example, they might assign each set of segments a different letter of the alphabet.

Number of segments	Revised vesting date	For trustee use only
	MMYYYY	
	M M Y Y Y Y	
	M M Y Y Y Y	
	M M Y Y Y Y	
	M M Y Y Y Y	
	M M Y Y Y Y	
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	M M Y Y Y Y	
	M M Y Y Y Y	
	M M Y Y Y Y	

Section 2 - Settlor Declaration

I request that the vesting date(s) for the segment(s) listed in Section 1 be deferred as indicated. I understand that only segments with a vesting date after the date of this form can be amended, and that the **trustees may override** or decline this request if they consider it appropriate.

Settlor's name	
Settlor's signature	
Date	D _I D M _I M Y _I Y _I Y _I Y
Section 3 - Trustees ac	knowledgment
We, the trustees, acknowledge	e receipt of this form and accept the amendment proposed in Section 1
(Fill in the boxes below for up	to four trustees)
First trustee name	
Signature	
Date	D D M M Y Y Y Y
Second trustee name	
Signature	
Date	D D M M Y Y Y Y Y

Third trustee name		
Signature		
S		
Date	D D M M Y Y Y Y	
Fourth trustee name		
Signature		
_		
Date		

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