



## Letter of Authority

### ADVISER FIRM DETAILS

<b>Firm Name:</b>	Pettecrew Financial Planning Ltd
<b>Address:</b>	76 Gloucester Road, Urmston, Manchester, M41 9AE
<b>Telephone Number:</b>	0161 393 8430 (Opening hours: Monday-Friday 9am-5pm)
<b>Email Address:</b>	admin@myfinancepage.co.uk
<b>FCA Reference Number:</b>	525421

### POLICY HOLDER DETAILS

	Policy Holder 1	Policy Holder 2
<b>Full Name:</b>		
<b>Date of Birth:</b>		
<b>Address:</b>		
<b>National Insurance No:</b>		

### **TO WHOM IT MAY CONCERN**

I/We authorise/appoint PETTECREW FINANCIAL PLANNING LTD as my/our financial adviser with immediate effect until further notice by me/us in writing. Please ensure all previous agencies are removed from my/our policy(s) and all future renewal commission is paid to the above firm. The above firm does not accept liability for any commission payments made before the date of this authority.

Please therefore grant authority to access information and transfer any servicing rights to the above firm for the following policy(s):

<b>Provider/Administrator:</b>	
<b>Administrator Address:</b>	
<b>Policy Reference(s):</b>	

Signature(s):

Print name(s):

Date: