**Action required**

**Your Child Trust Fund can be claimed from your 18th birthday**

Your Child Trust Fund (CTF) is an investment account opened initially with money from the government when you were born, to build up some savings for you. You need to tell us what you want to do with the money, after you turn 18.

**What do you need to do once you are 18?**

1. You need to send us documents (as listed on page 3), so we can check your identity
2. You need to complete the enclosed Maturity Option Form, to let us know what you want to do with your money
3. Send everything **in the post** to the following address:

RBS Collective Investment Funds Ltd, PO Box 9908, Chelmsford, CM99 2AF

Your money will be rolled over into a ‘matured CTF’ on your 18th birthday, and then we will act upon your instruction.

**Please do not take these documents to your bank branch, as it will delay you getting access to your money.**

**What are your options?**

You have 3 options that are set out on the next page. If you want to split your money between more than one option, this should be made clear on the Maturity Option Form by noting **the percentage** of money you would like apportioned to each.

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| **Option**  **1** | **I want to receive the money.**  You may want to take the money to spend now or put it into a savings account where it has the potential to grow, and you could spend at a later date. To do this you will need to have a UK bank account in your own name. You may have an existing current or savings account or if not, you can choose to set one up with any bank or building society. If you would like to set up an account with us, please ask in your local NatWest branch or go online at: <https://personal.NatWest.com/personal/current_accounts.html>,  **STEP 1 – You must complete and return the enclosed Maturity Option Form.**  **STEP 2 – You must provide valid form(s) of identification (please see Verifying your Identity section below) and a recent bank statement (dated within 6 months).** |
| **Option**  **2** | **I want to invest the money with you.**  Your CTF has been invested in our Stakeholder Fund since it was opened, and you can leave your money invested in a Stakeholder ISA.  **Important: If you are considering keeping your investment with us, or planning on investing elsewhere, you need to be aware that the value of your investment could go up or down, you may lose some or all your money and you should aim to invest for a minimum of 5 years.**  **STEP 1 – You must complete and return the enclosed Maturity Option Form.**  **STEP 2 – You must provide valid form(s) of identification (please see Verifying your Identity section below) and a recent bank statement (dated within 6 months).** |
| **Option**  **3** | **I want to transfer the money to another ISA Plan provider.**  You could decide to transfer the money to a Cash ISA or to another ISA you hold. If you don’t have an ISA, you can set one up with any ISA provider.  **Important: If you want to take this option, you do not need to return the Maturity Option Form, but you will need to speak to your ISA provider who will arrange the transfer directly with us.**  **STEP 1 – You must contact to your ISA provider who will arrange the transfer directly with us.** |

For more information on these options please go to our website:-

<https://personal.NatWest.com/personal/investments/existing-customers/Child_Trust_Fund.html>

**If you are unable to provide the documents listed or have any questions, please contact us on** 0345 300 2585**.** Our lines are open Monday to Friday 9am – 5.30pm (excluding bank holidays). Speech or hearing impaired customers can contact us by Text Relay 18001 0345 300 2585.

Yours sincerely,



For and on behalf of RBS Collective Investment Funds Limited

Enclosed:

CTF Maturity Option Form

**Verifying your Identity**

We need to check your identity to act upon your instruction. To do this, you must send us a certified copy (dated within the past 6 months) of one document from the table below (please do not send originals) as well as a certified copy of your bank statement for an account in your own name.

A certified copy is a copy of the original document that has been certified by one of the following, using their full name, business address, job role & signature. These cannot be a family member and the certifier should use their company stamp (if they have one).

* Bank or Building Society
* Solicitor or Lawyer
* Financial Adviser or Chartered Accountant
* Doctor or Dentist
* Teacher or Lecturer
* Minister of Religion
* Councillor
* Notary or Post Office

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| **Document List** | **Validity Guidelines** |
| UK Passport  EU/EEA Passport  Non UK/Non EU Passport | * Passport must be valid and have a future expiry date of no less than 6 months * Personal details must match the Maturity Option Form |
| Photocard Provisional/Full Driving Licence  Photocard Motorcycle Licence | * Personal details, including signature, must match the Maturity Option Form * If the address does not match please provide an explanation |
| Military ID Card | * Must be valid and issued by the British Armed Forces * Personal details, including signature, must match the Maturity Option Form * Must contain the staff serial number |
| Benefit Agency Documentation  (including student finance company) | * A letter from the Department of Work & Pensions (DWP), Job Centre or Universal Credit dated within the last 12 months * Personal details must match the Maturity Option Form |
| UK Birth/Adoption Certificate | * Full or Abbreviated Birth or Adoption Certificate * A Birth Certificate registered at an overseas Embassy, consulate of Military Barracks * Personal details must match the Maturity Option Form |
| EU/EEA ID Card  *(Romanian EU ID cards are not currently accepted)* | * ID Card must be valid and have a future expiry date * Personal details, including signature, must match the Maturity Option Form |
| PASS Card  *(Card must have a ‘PASS’ hologram on it)* | * Young Scot Card * Transport Scotland Card * Citizen Card * Portman Group Card * Validate UK Card |
| HMRC Letter | * Personal details must match the Maturity Option Form |

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| **CTF Maturity Options Form**  **Full Name:**  **Account Number:**  ***Please complete and sign the Account Holder’s Authority section at the end of the form*** |
| **Option 1 – Take the money Checklist** |
| Please put an X in each of the boxes provided to ensure you are returning all the documents we need to process your Encashment option. Please use black ink  A Certified copy of a valid document from the List on page 3  A recent bank statement (no more than 6 months old) that matches details below  Fully completed bank details below (matching your bank statement) |
| I wish to receive the full maturity proceeds.  I wish to receive \_\_\_\_\_\_\_\_% of the proceeds, sent to my bank account and the remainder transferred into an ISA***.***    **Please complete the form below to enable us to pay the proceeds to you.**  Bank/Building Society Name:   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   Sort Code:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |     Account Number:   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |   Roll Number (only applicable if you have a Building Society account):   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |   Payee Name:   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Option 2 – Invest the money with us/rollover** |
| Tick this box is you wish to rollover your full investment into an ISA  Tick this box if you have selected to receive some of your proceeds to your bank and some to be  transferred into an ISA |
| **Account Holder’s Authority** |
| Contact Telephone Number: Date:   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **D** | **D** | **M** | **M** | **Y** | **Y** |   **Account Holder’s Signature**: |

**Please do not submit this form to us until you are 18.**