

If you are a distributor

Please use this form to tell us that you distribute Child Trust Fund (CTF) accounts for a CTF provider.

Do **not** use this form if you are a CTF provider. For further information please refer to the Guidance Notes for CTF Providers which can be found at www.hmrc.gov.uk/ctf

Please write in CAPITAL letters using black ink.

When you have completed this form please send it to

**HM Revenue & Customs
APSS Audit Unit
St John's House
Merton Road
Bootle
Merseyside
L69 9BB**

Please keep your details up to date

Tell us in writing, as soon as possible, about any changes to the information you give on this form.

Information about approved Child Trust Fund providers and their distributors is published on our website www.childtrustfund.gov.uk and in the list sent to customer's, form CTF7 *Where to open your child's account*.

Part 1 Company details

Registered name or legal title (in full)

Address

Postcode

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Part 2 Application

I distribute Child Trust Fund accounts and wish to be included as a distributor in your publications.

Name of authorised signatory

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Position in company

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Signature of authorising officer

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Date

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Please turn over

Part 3 Liaison officer's contact details

Please enter the following details for the individual approved to act as liaison officer for the distributor

Name

Telephone number

Email address

Part 4 Information for customers

The details you give here will appear on our website www.childtrustfund.gov.uk and in the list sent to customer's, form CTF7 *Where to open your child's account*.

Your trading name

Your preferred method of customer contact. Tick one box only
If you tick more than one box we will publish the one given first.

Website - using the address given below

Telephone - using the number given below

From outlets

Enter your website address or telephone number here

Name of CTF provider you are distributing accounts for

When you have completed this form please send it to us at the address shown on Page 1.