ForgeTrust

LETTER OF ACCEPTANCE REQUEST

Contact Center: (800) 248-8447 | www.ForgeTrust.com

A Letter of Acceptance indicates Forge Trust Co.'s acceptance of asset(s) that are to be rolled over from a qualified retirement plan. Complete this form if you would like a Letter of Acceptance to be drafted by Forge Trust Co. To move funds or assets from a Traditional, Roth, SEP or SIMPLE IRA, or Coverdell ESA, do not use this form. Instead please complete our TRANSFER AUTHORIZATION form. If you have any questions about which type of form you should be completing, please contact us.

1. PERSONAL INFORMATION (*required field)

Should Forge Trust Co. need to contact you in regards to this request, your preferred method of contact is:

- ☐ Email
- ☐ Primary Phone

First Name*	Middle Name	Last Name*
Account Number*	Social Security Number* Last 4 Digits Only	Date of Birth* (MM/DD/YYYY)
Phone* XXX-XXX-XXXX	Email (your personal email only)	

2. REQUESTOR INFORMATION

If this form is filled out by the account owner, you can leave Section 2 blank. Otherwise, please complete Section 2 below.

Name	Request Date (MM/DD/YYYY)
Firm	Phone XXX-XXX-XXXX
Fax XXX-XXX-XXXX	Email (Your personal email only)

3. CUSTODIAN INFORMATION

Current Custodian/Plan Administrator Name	Client's Account Number at Current Custodian/Plan Administrator	
Current Custodian/Plan Administrator Address		
City	State/Province	Zip/Postal Code

Client is rolling over:

◯ Cash only	◯ Noncash assets* only	◯ Both cash and noncash assets*

** If rolling over non-cash assets in-kind, be sure to include an account statement with this form.*

Type of Retirement Plan at Current Custodian (do not use this form for an IRA transfer)

◯ 401k	◯ 403b	◯ 457	◯ Keogh
◯ Pension Plan	Name		
◯ Profit Sharing Plan	Name		
◯ Defined Benefit Plan	Name		
◯ Other	Please specify		

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4. FORWARDING AND OTHER INFORMATION

Client wants funds sent to Forge Trust Co. via:	To whom and where should the LOA be forwarded?
◯ Check	Name
◯ Wire (Incoming wire fee applies; see our *FEE SCHEDULE & FINANCIAL DISCLOSURE*)	Firm

Send by (Select up to two (2) options):

☐ Mail to the following address	
☐ Fax to	
☐ Email to	

5. SIGNATURE AND DATE (Account owner must sign and date)

Account Owner Name	
Account Owner Signature ✕	Date (MM/DD/YYYY)

Please sign and submit additional documents as required.

DELIVERY INSTRUCTIONS

If you are rolling over assets-in-kind, you must include an Account Statement and Incoming Asset Questionnaire with this form.

Email
Transfers-in@ForgeTrust.com

Fax
(650) 745-2907

Regular mail
Forge Trust Co.
PO Box 2048
San Francisco, CA 94126

Overnight mail
Forge Trust Co.
4 Embarcadero Ctr, Floor 15
San Francisco, CA 94111

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