

PLAN of CT Pooled Trust Checklist

The PLAN Trust Committee meets on the second Thursday of every month. Please have your attorney submit the following documents to PLAN no later than the Tuesday before the meeting:

1. **Subscriber Agreement** (rev 12/2011) fully executed with an attorney who is a professional member
 - a. *Initial* and signature on page four
 - b. May select Option one or Option two on page four as of 11/2013. If the subscriber agreement has been set up through probate court, then Option one must be selected.
2. **Personal Care Plan (PCP)**
 - a. Two page version of the PCP if submitting a monthly contribution and/or are age 65 or better.
 - b. Thirteen page version of the PCP if submitting a lump sum and under age 65.
3. **Spending Plan** required by DSS
 - a. If age 65 or better and over \$389.62/monthly.
 - b. If age 65 or better and depositing a lump sum, spending plan should be according to life expectancy whether the beneficiary resides in the community or in a nursing home.
4. **Proof of Disability**
 - a. MD letter stating client cannot perform *Activities of Daily Living (ADLs)* or
 - b. Disability determination letter from Social Security or
 - c. SSD payment stub or proof of direct deposit or
 - d. Disability determination letter from Colonial or
 - e. Copy of page 3 of a submitted W300
 - * If under age 65 must be determined disabled by the Social Security Administration
5. **Power of Attorney (POA) or PLAN Designation of Agent** form
 - a. If established by a POA: POA document must **specifically** state POA has the power to *establish and fund* an irrevocable trust. Unfortunately the ability to establish a trust as POA is not covered under “all other matters”.
6. If established by a conservator: **court decree** stating the conservator can *establish and fund* the trust.
7. **Payment** of the \$1,050.00 trust establishment fee.