EXECUTIVE INVESTMENT PLAN

APPLICATION FORM - NEW BUSINESS AND TOP-UP

For professional investor – individual, joint, corporate and trustee investor (Hong Kong only)

全才投資相連計劃
申請表格 - 開設戶口或額外投資

專業投資者專用—個人、聯名、企業及受託人投資者（僅適用於香港）

Utmost Wealth Solutions is a brand name used by a number of Utmost companies. This item has been issued by Utmost International Isle of Man Limited.

奧摩斯財富（Utmost Wealth Solutions）是奧摩斯（Utmost）公司旗下多個品牌的名稱。本文件由Utmost International Isle of Man Limited派發。

THIS DOCUMENT WAS LAST UPDATED IN JULY 2025.

Please confirm with your financial adviser that this is the most up-to-date document for your product or servicing needs.

本表格於2025年7月作出最後更新。

請向理財顧問查詢本表格是最新版本以及切合您的需要。

USING THE EDITABLE FIELDS?

To ensure your information is saved correctly, we recommend you save the form to your desktop before you start completing the required fields.

填寫PDF表格

為確保您的資料能正確儲存，我們建議您先將表格下載儲存到電腦，才開始填寫。

CUSTOMER ID NUMBER(S) IF KNOWN PLEASE ENTER THE CUSTOMER ID NUMBER(S)
客戶識別號碼 如已知悉，請於以下空格填寫客戶識別號碼。

Applicant 1
申請者1 ______

Applicant 2
申請者2 ______

Policy number (if adding to an existing Policy)
保單編號(於現有保單作額外投資) ______

FINANCIAL ADVISER DETAILS 理財顧問資料

Utmost International Isle of Man Limited account number 本公司編號		Address 地址	
Adviser ID 理財顧問識別號碼		Telephone number 電話	
Name of financial adviser 理財顧問姓名		Fax number 傳真	
Company name 公司名稱		E-mail address 電郵地址	

Utmost International Isle of Man Limited only accepts business introduced by companies which have Terms of Business with us.
Utmost International Isle of Man Limited僅接受與本公司已訂立業務條款的公司所轉介的業務。

We only sell our products through financial advisers as we believe it is important you receive independent financial advice. As it is you who chooses your financial adviser, you need to bear in mind that they are acting on your behalf and not on behalf of Utmost International Isle of Man Limited. You are responsible for their action or omissions.

All references to **we**, **us** and **our** in this application form mean Utmost International Isle of Man Limited.

For simplicity all references to Policy in this application form mean the policy or group of policies issued to the applicant(s) following their application for an Executive Investment Plan.

本公司僅透過理財顧問銷售產品。本公司相信，獨立財務意見對您十分重要。由於理財顧問是由您自行選擇，您必須緊記，理財顧問是您的代理，而不是Utmost International Isle of Man Limited的代理，您須要對他們的行為或遺漏負責。

本申請表格內所提及的「**我們**」及「**本公司**」均指「Utmost International Isle of Man Limited」。

為方便理解，在本申請表格內，所有有關「保單」的意思，是指根據申請者就全才投資相連計劃獲發出的保單或一組保單。

IMPORTANT TAXATION INFORMATION 重要稅務資料

Under Automatic Exchange of Information (AEOI) regulations Utmost International Isle of Man Limited is required to obtain information about an applicant's tax status. To enable us to comply with these regulations, when submitting this application form you must also submit the '**Tax declaration and self-certification – for Individual investors – (Hong Kong only)**' for applications by individuals or the '**Tax declaration and self-certification – for Entity investors – (Hong Kong only)**' or '**Tax declaration and self-certification for Trusts**' for corporate and trustee investors. Completion and submission of a self-certification is mandatory and failure to provide one could result in your Portfolio being reported under AEOI by default. If any of the information contained in the self-certification changes please advise Utmost International Isle of Man Limited promptly so we can determine if a new self-certification is required.

根據自動交換資料(AEOI)規例，Utmost International Isle of Man Limited需要取得申請者稅務狀況的資料。為遵守該等規定，當提交本申請表格時，個人或企業投資者必須同時提交「**稅務聲明及自我證明—個人投資者—(僅適用於香港)**」或「**稅務資料及自我證明—實體投資者—(僅適用於香港)**」表格，而受託人投資者則需提交「**稅務聲明及自我證明—信託**」表格。您必須填妥並提交自我證明，否則可能導致您的計劃預設為根據AEOI進行申報。倘若自我證明中所載的任何資料出現變動，請即知會Utmost International Isle of Man Limited，讓我們確定是否需要提交新的自我證明。

IMPORTANT INFORMATION FOR YOU – THE APPLICANT 重要資料—申請者須知

Your application form can then be submitted via Wealth Interactive. If you choose this option your application can be submitted to us immediately without the delay that can be experienced through the postal system.

Before completing the application form, please make sure you receive and read through the **Executive Investment Plan product brochure** and **product key facts statement**.

Please also complete the 'Professional Investor declaration for investment in Investment-Linked Assurance Scheme ("ILAS") and non-SFC authorised underlying asset choices' and submit together with this application.

您可透過盈富互動遞交申請。假若您作出此選擇，您的申請可以即時遞交，免除因郵遞而延長申請時間。

在填寫申請表格前，請必須索取**全才投資相連計劃產品說明書**及**產品資料概要**並仔細閱讀。

請同時填妥「投資於投資相連壽險計劃(「投連壽險」)及非證監會認可的相關資產選擇之專業投資者聲明」，並與本申請表格一併提交。

ONLINE SERVICE ACCOUNT ON WEALTH INTERACTIVE 盈富互動的網上服務戶口

When applying for the Executive Investment Plan, we will automatically set you, the applicant, up with an Online Service Account on our Wealth Interactive service. You will receive an email from us containing a link that lets you activate this service.

Once the policy and the Online Service Account are live, you can sign in to Wealth Interactive whenever you want to review the policy and carry out key transactions. You can also find all the information needed about the investment with us in one place.

When we need to send you communications, such as policy valuations for example, we will generally do this through the Online Service Account, although there will be times when we still need to correspond by post.

當您申請全才投資相連計劃時，我們會自動為您在盈富互動服務開設網上服務戶口。您會收到由我們發出的電郵，讓您透過連結啟動服務。

當您的保單及網上服務戶口生效時，您可以任何時候登入盈富互動服務檢視您的保單或進行主要交易。您亦可以瀏覽所有關於您的投資的資訊。

當我們需要與您通訊，例如發送保單估值，我們通常會透過您的網上服務戶口與您聯絡；但我們有時候仍然需要以郵遞方式與您聯絡。

For trustee applicant(s)

Please ensure that the trust deed provisions allow delegation of trustees' powers to one trustee only, and for corporate trustees the articles of association permits the company to delegate approval on behalf of the company to one authorised signatory or there has been a board resolution that confirms that one authorised signatory has authority to act on behalf of the corporate trustee solely, later referred to as the Lead Policyholder.

If it does not then you MUST opt to transact with us and receive communications from us by post rather than online. ☐

Please take the box on the right. (✓)

適用於受託人申請者

請確保信託契約條款允許將受託人權力授予於僅一位受託人；而對於企業受託人而言，公司的章程細則需允許公司委任予一名授權簽署人，或已透過董事會決議並確認一名授權簽署人有權代表企業受託人進行批核。上述人士此後會稱為首要保單持有人。

若非如此，您必須選擇透過郵遞與我們進行交易及接收我們的通訊，而非透過網上平台，並於右方加上剔號。(✓) ☐

For corporate applicant(s)

Please ensure that your memorandum of association permits the company to delegate approval on behalf of the company to one authorised signatory, later referred to as the Lead Policyholder.

If it does not then we recommend that the company opt to transact with us and receive communications from us by post rather than online.

If the company would prefer to receive communications from us by post rather than online, please tick here. (✓) ☐

適用於企業申請者

請確保公司組織章程大綱允許公司委任一名授權簽署人代表公司進行批核，此後會稱為首要保單持有人。

若非如此，我們建議企業選擇透過郵遞與我們進行交易及接收我們的通訊，而非透過網上平台。若公司希望透過郵遞而非網上方式接收本公司的通訊，請在此加上剔號。(✓) ☐

COMPLETING THE FORM 填寫表格

To complete this form:

› use CAPITAL LETTERS only
› use blue or black ink
› specify choices as appropriate
› complete all relevant sections
› do not use correction fluid; any amendments should be crossed out and initialled by all applicants (authorised signatories of the company or corporate trustee, if applicable).

填寫本申請表格時：

› 僅以英文正楷填寫
› 使用藍色或黑色原子筆
› 於適當位置確定選擇
› 填寫所有相關部分
› 不可使用塗改液。如有任何修改，應將原字劃掉，並由所有申請者簽署（公司或企業受託人的授權簽署人，如適用）。

A TYPE OF APPLICATION 申請類別

Type of client
客戶類別

- [ ] Individual 個人
- [ ] Joint 聯名
- [ ] Corporation 企業
- [ ] Non-corporate Trustee (Individual/joint) 非企業受託人(個人/聯名)
- [ ] Corporate Trustee 企業受託人

NATURE AND PURPOSE OF INVESTMENT 投資性質及目的

IMPORTANT NOTE 重要資料

The responses provided below are required to meet our obligations under applicable anti-money laundering and countering the financing of terrorism regulations.

Please note that it is your responsibility, after taking any necessary legal or tax advice, from external professional parties such as your appointed financial adviser, to ensure that the product is a suitable investment and remains suitable based on your needs, objectives and risk appetite.

根據相關的反洗黑錢和打擊資助恐怖分子法例，本公司收集下列資料以履行我們的義務。

請注意，透過第三方專業人士(如您委任的財務顧問)獲得所需的法律或稅務建議，您有責任確保產品是一項合適的投資；並根據您的需求、目標和可承受風險能力確認其合適性。

1 What is the investment purpose of selecting this Utmost policy?
選擇此保單的投資目的是什麼?

Please select which options apply:
請選擇適用項目：

- [ ] Medium to Long Term Investment to produce 'income' stream in the form of capital withdrawals
  中長線投資，提取資本作為收入
- [ ] Medium to Long Term Investment for capital growth
  中長線投資，作為資本增長
- [ ] Medium to Long Term Investment to produce a capital sum for retirement
  中長線投資，作為退休資金
- [ ] Accumulation of pension scheme assets
  累積退休金計劃的資產
- [ ] Investment mobility (when working in different jurisdictions)
  移動性投資(在不同司法管轄區工作時)
- [ ] Consolidation of financial assets into one product
  整合金融資產
- [ ] Estate and succession planning to pass wealth to next generation
  遺產和繼承規劃，財富傳承
- [ ] Life assurance protection
  壽險保障
- [ ] Other 其他 ______

2 What influenced your decision to invest in the Isle of Man rather than your country of residence?
為什麼您選擇投資馬恩島而不是您的居住國家?

Please select which options apply:
請選擇適用項目:

- ☐ Strong regulatory framework overseeing financial services business
  嚴密監管架構以監督金融服務行業
- ☐ Investor protection
  投資者保障
- ☐ Long history of economic stability
  經濟長期穩定
- ☐ Political autonomy and legislative freedom
  政治自主與立法自由
- ☐ Skilled financial services workforce
  經驗豐富的金融從業員
- ☐ Favourable tax environment
  優勝的稅務環境
- ☐ Other 其他 ____________

3 How many years do you anticipate holding the Utmost policy?
您預計將持有保單多少年?

- ☐ 1 to 5 years 1至5年
- ☐ 6 to 10 years 6至10年
- ☐ 11 to 15 years 11至15年
- ☐ 16 to 20 years 16至20年
- ☐ 20+ years 20年以上
- ☐ Unknown at present 目前未知

An early withdrawal charge may apply if the policy is surrendered within the first five years from the payment of the premium. Please consult your financial adviser for further details.
若在首五年內退保,可能需要支付提早提款費。請向您的財務顧問查詢詳情。

4 How many additional premiums do you anticipate making into the policy each year?
您預計每年額外投資多少次?

- ☐ 0 不會
- ☐ 1 to 2 1至2次
- ☐ 3 to 4 3至4次
- ☐ 5+ 5次以上
- ☐ Unknown at present 目前未知

5 What percentage of the value of the policy do you expect to withdraw each year?
預計每年提取保單價值多少百分比?

- ☐ 0%
- ☐ 1 - 5%
- ☐ 6 - 10%
- ☐ 11 - 20%
- ☐ 20+%
- ☐ Unknown at present 目前未知

6 Do you intend to transfer the policy to another party at some future point? If so, what is their relationship to you?
您是否計劃未來將保單轉讓給其他人?如果是,您們是什麼關係?

Please select which options apply:
請選擇適用項目:

- ☐ Not planning to transfer 未有轉讓計劃
- ☐ Spouse 配偶
- ☐ Children 子女
- ☐ Grandchildren 孫
- ☐ Parent 父母
- ☐ Business associate/partner 生意合夥人
- ☐ Other 其他 ______
- ☐ Unknown at present 目前未知

7 Do you intend to use the policy for collateral for a loan at any point?
您是否計劃使用保單作為貸款抵押?

- ☐ Yes 是
- ☐ No 否
- ☐ Unknown at present 目前未知

If "Yes", please indicate the purpose of the loan
如果是,請說明貸款用途

______

8 Do you have plans to relocate to, or work in, another country?
您是否有計劃到其他國家移居或工作?

- [ ] Yes 是
- [ ] No 否
- [ ] Unknown at present 目前未知

If "Yes", please indicate the country
如果是，請指出國家

NEW INVESTMENT 首次投資

If this is an application for a NEW PLAN, please indicate here. (✓)
如屬首次申請，請在此項加上剔號。(✓)

Applicant(s) information required 申請者資料

▶ **Please complete all applicable sections.** 請填寫所有有關部分。

Financial adviser information required 理財顧問資料

▶ **Please complete section M and N in full.** 必須填寫M及N欄。

ADDITIONAL INVESTMENT 額外投資

If this is an application for an ADDITIONAL INVESTMENT, please provide your existing Policy number:

(you can find this in your policy documentation)

如申請額外投資，請提供現有保單編號:

（編號可在保單文件中查閱）

Applicant(s) information required (sections to be completed)

▶ **Section B, unless your details have changed, eg address, you only need to complete the full forename(s) and surname of each policyholder.**

▶ **Sections D and E, if the source of funding and source of wealth remain unchanged from previous Know Your Client (KYC) submissions[1] for this Policy, please just state the date of last submission and then complete the declaration in section L. If there have been any changes in either the source of funding or source of wealth in relation to the additional investment, please complete Sections D and E in full.**

▶ **Section F, always complete premium payment details in full such as currency, amount and payment method.**

▶ **Section G, please complete if applicable.**

▶ **Section H, please complete if applicable.**

▶ **Section L, ALL applicants must complete the declaration in full.**

Financial adviser information required (sections to be completed)

▶ **Section M, please complete part A. Complete parts B and C only in the event that new evidence requirements are being provided. In respect of non-corporate trustee applicant, corporate/corporate trustee applicant, please also fill in section M1 or M2 where appropriate and applicable.**

▶ **Section N, please complete in full.**

申請者資料(必須填寫部分)

▶ *B*部分，除非您的資料有變，例如更改地址，否則只需要填寫每位保單持有人的姓名全稱。

▶ *D*及E部分，假若本戶口的資金來源及財富來源與最後一次提交的「客戶資料」*(Know Your Client)* [1]相同，請指出最後一次提交的日期並填寫L部分的聲明。假若額外投資的資金來源或財富來源有任何變更，請填寫整個D及E部分。

[1] If there have been no changes, previously submitted KYC information is valid for 24 months.
如沒有任何更改，最後一次提交的客戶資料 (Know Your Client) 有效期為24個月。

- ▶ *F*部分，必須填寫繳付供款的全部資料，例如貨幣、金額及繳付方法等。
- ▶ *G*部分，如適用時請填寫。
- ▶ *H*部分，如適用時請填寫。
- ▶ *L*部分，所有申請者必須填寫整個聲明。

理財顧問資料（必須填寫部分）

- ▶ *M*部分，您必須填寫A節；如有提供新證明文件時，請同時填寫B及C節。若為非企業受託人申請、企業／企業受託人投資者申請，請分別填妥*M1*或*M2*適用之部分。
- ▶ *N*部分，必須填寫。

POLICY CURRENCY 保單貨幣

I wish my Policy to be valued in (✓) 我希望保單的估值貨幣為 (✓) ☐ HK$ 港元 ☐ US$ 美元 ☐ GBP £ 英鎊 ☐ Euro € 歐元 ☐ Other currency 其他貨幣 ☐

Please note if no currency is entered your Policy currency will be pound sterling (£). The Policy currency cannot be changed after the Policy is set up.

請注意，如果沒有列明貨幣，您的保單貨幣將是英鎊。保單一經成立，保單貨幣不可更改。

APPOINTMENT OF AN AUTHORISED CUSTODIAN 委任託管人

Please tick if you wish to appoint an authorised custodian? (✓) ☐ Authorised custodian 授權託管人

假若希望委任託管人，請在此處加上剔號。(✓)

Name of custodian
託管人名稱 ☐

If you have ticked above, you need to complete the 'Request to transfer to an authorised custodian account form' which is available from your financial adviser.

假若您已在上述位置加上剔號，請填妥《要求轉移至授權託管帳戶—委任您的託管人》。

LEAD POLICYHOLDER FOR ONLINE SERVICE ACCOUNTS 首要保單持有人—網上服務戶口

For trustee/corporate applicant on page 4 which indicated that the trust deed provision or memorandum of association does not permit the delegation of approval to one trustee/authorised signatory, please skip the following part and proceed to section B.

如受託人／企業申請者於第四頁已表明信託契約的條款或公司的組織章程大綱不允許授權予一名受託人／授權簽署人，則不用填寫以下部分，並請繼續填寫B部分。

For joint applicants 聯名申請者

Each applicant must agree to select the same Lead Policyholder. 每名申請者必須同意選擇同一名首要保單持有人。

We, the applicant(s), appoint (insert name in the box)
我們每位申請者同意委任（於空格填寫姓名） ☐ to act as the Lead Policyholder for policies comprising our Executive Investment Plan in accordance with the Policy Terms.
根據保單條款作為全才投資相連計劃的首要保單持有人。

The specific email address[2] which will be used for the Online Service Account is
為使用網上服務而設的電郵地址[2]是 ☐

[2] Please note each person must have a unique email address. An email address cannot be shared by users on Wealth Interactive.
請注意，客戶必須使用一個獨立的電郵地址作網上服務用途，並且不能與其他用戶共用。

For corporate applicants 企業申請者

Under appropriate authority the company must appoint an individual as the Lead Policyholder to access and transact online on behalf of the company. If this is not the first application for this company AND the company already has a Lead Policyholder then it is not necessary to complete this section. The directors/authorised signatories must agree to select the same Lead Policyholder.

在適當的權限下，公司必須指定一名人士作為首要保單持有人，並代表公司於網上平台瀏覽保單資料及進行交易。倘若貴公司並非首次申請，且公司已有首要保單持有人，則無需填寫本部分。董事／授權簽署人必須同意選擇同一名首要保單持有人。

The company appoints (insert name in the box)
本公司同意委任
(於空格填寫姓名) ______ to act as the Lead Policyholder for the policies comprising our Executive Investment Plan accordance with the Policy Terms.
根據保單條款作為全才投資相連計劃的首要保單持有人。

The specific email address[3] which will be used for the Online Service Account is
為使用網上服務而設的電郵地址[3]是 ______

For trustees applicants 受託人申請者

If you are a corporate trustee, do you want to offer our Online Service Account, Wealth Interactive, to all the members? ☐ Yes 是 ☐ No 否

如為企業受託人，會否提供我們的網上服戶口(盈富互動)予所有成員?

If allowed by the provisions of the trust deed and trust law, and for corporate trustees if also permitted in the articles of association, one of the trustees must be appointed as the Lead Policyholder and all trustees must agree to this appointment. The declaration on page 30 sets out the role of the Lead Policyholder.

如信託契約和信託法例的規定允許，以及企業受託人的公司章程允許，其中一名受託人必須被委任為主要保單持有人，而所有受託人必須同意此項委任。第30頁的聲明闡述了主要保單持有人的角色。

We, the trustee(s), appoint (insert name in the box)
我們每位受託申請者同意委任
(於空格填寫姓名) ______ to act as the Lead Policyholder for the policies comprising our Executive Investment Plan in accordance with the Policy Terms.
根據保單條款作為全才投資相連計劃的首要保單持有人。

The specific email address[3] which will be used for the Online Service Account is
為使用網上服務而設的電郵地址[3]是 ______

B1 INDIVIDUAL/JOINT/TRUSTEE APPLICANT(S) 所有個人／聯名／受託人申請者資料

In this section, please give details of all individual applicants. Applicants must be at least 18 years old and the maximum age is 69. The maximum age for at least one of the lives assured must be 69 or below.

請提供所有個人申請者的資料。申請者必須年滿18歲，年齡上限為69歲。最少一位受保人年齡上限為69歲或以下。

All applicants must complete and sign the declaration in section L.

所有申請者必須填寫並簽署L部分的聲明。

	Applicant 1 申請者1	**Applicant 2 (if any)** 申請者2(如適用)
Is/Are the applicant(s) also going to be a life assured? (✓) 申請者是否同為受保人? (✓)	☐ Yes 是 ☐ No 否	☐ Yes 是 ☐ No 否
Title (✓) 稱銜 (✓)	☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Other 其他 ______	☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Other 其他 ______
Full forename(s) 名字		
Surname 姓氏		

[3] Please note each person must have a unique email address. An email address cannot be shared by users on Wealth Interactive.
請注意，客戶必須使用一個獨立的電郵地址作網上服務用途，並且不能與其他用戶共用。

Do you have a maiden name, previous name or alias? 您是否有婚前姓名、前稱或別名?	☐ Yes 是 ☐ No 否	☐ Yes 是 ☐ No 否
If "Yes", please provide the other name(s) 如有,請提供其他名字。		
Sex (✓) 性別 (✓)	☐ Male 男 ☐ Female 女	☐ Male 男 ☐ Female 女
Date of birth 出生日期	d d m m y y y y	d d m m y y y y
Country of birth 出生國家		
Nationality 國籍		
Dual nationality (if applicable) 雙重國籍(如適用)		
Hong Kong identity card number/Passport number[4] 香港身份證號碼/護照號碼[4]		
Country of residence 居住國家		
Residential address (currently residing) 居住地址(現時居所)		
Correspondence address (if left blank we will use the residential address for correspondence) 通訊地址(如果未有填寫,我們將以居住地址作為通訊地址)		
Telephone number including area code (daytime) 電話號碼連地區號碼(日間)		
Telephone number including area code (evening) 電話號碼連地區號碼(晚間)		
Email address 電郵地址 (Please note each client must have a unique email address. An email address cannot be shared by users on Wealth Interactive.) (請注意:每名客戶必須使用獨立電郵地址。電郵地址不可以在盈富互動上與其他用戶共用。)		

If there are any further applicants, please photocopy the section on the previous page, attach the details with this application form and tick here (✓). ☐

如果有任何其他申請者,請複印上一頁部分,將資料與本申請表格一同呈交,並在此加上剔號(✓)。

▶ If additional pages are added, each separate page must be initialled by all applicants.

▶ 如有附頁,每一頁均須經所有申請者簽署。

[4] For applicant who is Hong Kong **permanent** resident, please provide the Hong Kong identity card number as a minimum requirement. For an applicant who is not Hong Kong permanent resident, please provide the Hong Kong identity card/ passport number as appropriate.
屬香港**永久**居民的申請者須至少提供香港身份證號碼。不屬香港永久居民的申請者請提供香港身份證/護照號碼。

EMPLOYMENT DETAILS 受僱資料

This section must be completed except for an additional investment that applies under option 1 of section D.

Please give details of your employer or your own company if self-employed.

If you have retired or are not currently employed, please include details of your previous employer or your own company. If you have never been employed, please state N/A. Please also enter your final year's salary/income and bonus if any.

除了額外投資(並須符合D部分第一項),本部分在任何情況下均須全部填寫。

請提供僱主資料。假若屬自僱人士,請提供自營公司資料。

假若為退休人士或現未受僱,請提供前僱主或自營公司的資料。假若從來沒有受僱,請加上「不適用」;並請提供最後一年的薪金/收入及紅利(如適用)。

	Applicant 1 申請者1	Applicant 2 (if any) 申請者2(如適用)
Employment status (✓) 受僱狀況 (✓)	☐ Employed 受僱 ☐ Self Employed 自僱人士 ☐ Retired 退休 ☐ Not Employed 未有受僱	☐ Employed 受僱 ☐ Self Employed 自僱人士 ☐ Retired 退休 ☐ Not Employed 未有受僱
Date of unemployment or retirement (if applicable) 失業或退休的日期(如適用)	d d m m y y y y	d d m m y y y y
Occupation (including role, e.g. Director and sector, e.g. Accountancy. If you have retired please include your occupation before retirement. Please check that the industry is not a high or very high risk industry as confirmed in our **Anti-Money Laundering and Source of Wealth Requirements**. 職位(包括職位如董事和界別如會計。如果您已退休,請包括退休前的職業。請查閱從事行業並非**反洗黑錢及財富來源要求**中被列為的高或極高風險行業。)		
Name of employer or your own company 僱主或自營公司名稱		
Length of time being in this occupation 受僱上述職業年期	years 年 months 月	years 年 months 月
Address of employer or your own company 僱主或自營公司地址		
Country 國家		
Website address of employer or your own company (if any) 僱主或自營公司網址 (如適用)		
Last year's gross salary/income (state currency and amount) 去年總薪金/收入 (列明貨幣及金額)		

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Currency (✓) 貨幣 (✓)	☐ HK$ 港元 ☐ US$ 美元 ☐ GBP £ 英鎊 ☐ Euro € 歐元 ☐ Other (state currency) 其他(列明貨幣)	☐ HK$ 港元 ☐ US$ 美元 ☐ GBP £ 英鎊 ☐ Euro € 歐元 ☐ Other (state currency) 其他(列明貨幣)
Last year's bonus (if applicable, state currency and amount) 去年紅利(如適用,列明貨幣及金額)		
If you receive income from another source, please provide full details here (e.g. dividend, investment, rental income including their nature and source) 假若您從其他渠道賺取收入,請詳細列明(例如股息、投資、租金收入等的性質及來源)		

If there are any further applicants, please photocopy the section on the previous, attach the details with this application form and tick here (✓). ☐

如果有任何其他申請者,請複印上一頁部分,將資料與本申請表格一同呈交,並在此加上剔號(✓)。

▶ If additional pages are added, each separate page must be initialled by all applicants.

▶ 如有附頁,每一頁均須經所有申請者簽署。

B2 CORPORATE/CORPORATE TRUSTEE APPLICANT 企業/企業受託人申請者資料

In this section, please give details of the corporate applicant.
請於本部分提供企業申請者的資料。

CORPORATE APPLICANT 企業申請者

Please tick (✓) 請加上剔號 (✓)	☐ Private company 私人公司 ☐ Public company 上市公司 ☐ Other 其他
Company name 企業名稱	
Contact person 聯絡人	
Country of registration 註冊國家	
Company registration number 企業註冊號碼	
Date of incorporation 註冊成立日期	d d m m y y y y
State the jurisdiction in which the company is liable for tax 企業所屬的稅務司法管轄區	
Registered office address 註冊辦事處地址 (This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses) (本項資料必須完整提供。我們不接納郵政信箱及轉寄地址)	 Postcode 郵區編號

Correspondence address
通訊地址

Postcode 郵區編號

Utmost International Isle of Man Limited accepts no responsibility for the consequences of sending documentation to this correspondence address, or to an address notified subsequently. Utmost International Isle of Man Limited reserves the right to send correspondence to a registered office address where regulations prevent it being sent to a third party.

本公司對向本通訊地址或隨後所知會地址寄發文件之後果概不承擔任何責任。若條例禁止向任何其他地址寄發通訊，則本公司保留權利向註冊辦事處地址寄發通訊。

Telephone number including area code (daytime)
電話號碼包括區號（日間）

E-mail address 電郵地址
(Please note each person must have a unique email address. An email address cannot be shared by users on Wealth Interactive.)
（請注意，客戶必須使用一個獨立的電郵地址作網上服務用途，且不能與其他用戶共用盈富互動。）

Corporate website address
企業網站地址

Is the company a trading company? If "yes", state its main business
企業是否貿易公司？如是，請指出主要業務

Yes 是 No 否

Please state the company's main business
(for example manufacturing or trading company)
請註明公司的主要業務
（如製造或貿易公司）

Is the company quoted on a recognised stock exchange? If 'Yes', which one?
公司是否在認可的證券交易所上市？如是，哪個？

Yes 是 No 否

AUTHORISED SIGNATORIES 授權簽署人

Please confirm the minimum number of authorised signatories for the company needed to give instructions.

在作出指示時，需要授權簽署人的最低數目。

List all the current directors of the company (continue as necessary on a separate sheet).
列出公司現時的所有董事（如須要，可另外加頁）。

FULL NAME 全名	DATE OF BIRTH 出生日期
	d d m m y y y y
	d d m m y y y y
	d d m m y y y y
	d d m m y y y y
	d d m m y y y y
	d d m m y y y y

The company directors/authorised signatories of the company must complete and sign the declaration in section L.
公司董事／授權簽署人須填妥及簽署L部分的聲明。

- **Additional documents are needed to evidence the identities of at least two directors, one of whom must be an executive director of the company. Plus, if different to these, we also need to verify the identity of those who have signed the application form.**
- **需要提供核證至少兩位董事(其中一名須為執行董事)的身份。如簽署申請表人士並非上述董事,我們還需要核證其身份。**

B3 DETAILS OF THE TRUST - THIS SECTION APPLIES TO TRUSTEE APPLICANTS 信託資料 — 此部分適用於受託人申請者

In this section, please give the following details: the name of the trust (for example, 'the Mary Jones Policy Trust dated 1 April 1990', 'the John Brown Will Trust') and the date the trust was created on.

請於本部分提供以下詳細資料:信託名稱(例如:「於1990年4月1日建立的黃小玲信託計劃」、「陳大文的遺產信託」)及信託建立日期。

The trust name is:
信託的名稱是:

The trust was created on:
信託建立日期

d	d	m	m	y	y	y	y

Trust details: 信託詳情:

- Please explain the reason for establishing the trust, the type of trust it is and detail the source of the trust assets and the country of origin.
請填寫建立信託的原因、信託類別,並詳細說明信託資產的來源及來源國家。

Where was the Trust established?
信託在何處成立?

Is this investment in respect of employee benefits?
投資是否有關僱員福利?

☐ Yes 是 ☐ No 否

B4 POLITICALLY EXPOSED PERSON - THIS SECTION APPLIES TO ALL APPLICANT TYPES 政治人物 — 此部分適用於所有類別申請者

Under our current anti-money laundering obligations, we are required to identify persons associated with this application who could be classed as a Politically Exposed Person ("PEP"). PEP is a term used to describe someone who is currently or has previously been, entrusted with prominent public functions or responsibilities. For example: a Head of State, a holder of a senior political or government post, a senior member of the Judiciary or the Military, a senior employee of a State Owned Corporation, or a board member of a Central Bank. Immediate family members or close associates of a PEP should be considered a PEP in their own right. Provide details in the box below of any persons that could be considered a PEP (as defined above) in relation to this application. **Where information as to the PEP's occupation and current employer or previous employer, as relevant, is not captured elsewhere in the application form, please provide this information below. Please include the name of the employer and the employer's address.**

Non-completion confirms that there are no associated PEPs.

鑑於我們目前的反洗黑錢義務,我們須要識別與這申請有關的人士,而這些人士可能被歸類為政治人物(「PEP」)。政治人物是指目前或曾經被委託擔任重要公職或責任的人士,例如:國家元首、任政治或政府高級職位、司法機構或軍隊的高級成員、國有企業的高級僱員或中央銀行的董事會成員。政治人物的直系親屬或緊密夥伴應被視為政治人物。**請在下方提供與本申請相關而可被視為政治人物(如上界定)的任何人員詳情。若本申請尚未記載有關政治人物的職業、現任僱主、或前僱主的相關資料,請在下方提供。請列明僱主姓名和地址。**

如未填妥,我們將假設沒有關連的政治人物。

If a client is a PEP, or is linked to a PEP, Source of Funds evidence must be provided with the application and funding must come from the applicant's bank account. Due to the increased risk of accepting business from PEPs and the specific regulatory requirements relating to them, Utmost International Isle of Man Limited will require Source of Wealth information which can be provided using the Source of Wealth Questionnaire, and may also require Source of Wealth evidence.

如果客戶是政治人物或與政治人物有關，提交本申請表格時則必須同時提供資金來源證明文件，而資金必須是來自申請人的銀行帳戶。由於接受政治人物業務的風險增加，以及與之相關的特定法規要求，本公司將要求提供財富來源資料（可透過「財富來源表格(Source of Wealth Questionnaire)」提供），及財富來源的證明文件。

B5 EXISTING CONTRACTS – THIS SECTION APPLIES TO ALL APPLICANT TYPES
現有保單 — 此部分適用於所有類別申請者

Please provide details of any existing Utmost International Isle of Man Limited contracts you have or are making payments to (if applicable)

請提供您任何現有或正在繳款的Utmost International Isle of Man Limited保單詳情（如適用）

Applicant 1 申請者1	Applicant 2 (if any) 申請者2（如適用）
Type of contract 計劃類型	Policy number 計劃編號

C DETAILS OF THE LIFE/LIVES ASSURED 受保人資料

Please note you do not need to complete this section if the applicant(s) is/are going to be the only life/lives assured.

請注意，假若申請者與受保人同屬一人便毋須填寫此部份。

The maximum age for at least one of the lives assured must be 69 or below.

最少一位受保人年齡上限為69歲或以下。

	First life assured (if any) 首名受保人（如適用）	Second life assured (if any) 第二名受保人（如適用）
Title (✓) 稱銜 (✓)	☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Other 其他	☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Other 其他
Full forename(s) 名字		
Surname 姓氏		
Maiden name, previous name or alias? 您是否有婚前姓名、前稱或別名?	☐ Yes 是 ☐ No 否	☐ Yes 是 ☐ No 否
If "Yes", please provide the other name(s) 如有，請提供其他名字。		

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Sex (✓) 性別 (✓)	☐ Male 男 ☐ Female 女	☐ Male 男 ☐ Female 女
Date of birth 出生日期	d d m m y y y y	d d m m y y y y
Nationality 國籍		
Dual nationality (if applicable) 雙重國籍(如適用)		
Residential address (currently residing) 居住地址(現時居所)		
Country of residence 居住國家		
Relationship to applicant(s) 與申請者關係		

	Third life assured (if any) **第三名受保人(如適用)**	**Fourth life assured (if any)** **第四名受保人(如適用)**
Title (✓) 稱銜 (✓)	☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Other 其他	☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Other 其他
Full forename(s) 名字		
Surname 姓氏		
Maiden name, previous name or alias? 您是否有婚前姓名、前稱或別名?	☐ Yes 是 ☐ No 否	☐ Yes 是 ☐ No 否
If "Yes", please provide the other name(s) 如有,請提供其他名字。		
Sex (✓) 性別 (✓)	☐ Male 男 ☐ Female 女	☐ Male 男 ☐ Female 女
Date of birth 出生日期	d d m m y y y y	d d m m y y y y
Nationality 國籍		
Dual nationality (if applicable) 雙重國籍(如適用)		
Residential address (currently residing) 居住地址(現時居所)		
Country of residence 居住國家		
Relationship to applicant(s) 與申請者關係		

D SOURCE OF FUNDS 資金來源

If this is an application for a NEW INVESTMENT, this section must be completed in full in all instances.

假若申請屬首次投資，在任何情況下均須填寫本部分。

If this is an application for an ADDITIONAL INVESTMENT ONLY, please follow one of the two options below:

假若申請屬額外投資，請遵照以下兩項的其中一項處理：

1. In the event that the bank details of where funds are being remitted from and activity which generated amount to be invested (Know Your Client information) relating to this additional investment **have not changed** since the last submission of Know Your Client information, please provide the date of this submission[5].

   假若是次額外投資的資金匯出之銀行資料及引申投資金額的活動（「客戶資料」）與最後一次提交的「客戶資料」**維持不變**，請提供最後一次提交日期[5]。

   Date of last submission[6] d d m m y y y y
   最後一次提交日期[6]

2. In the event that the bank details of where funds are being remitted from and activity which generated amount to be invested relating to this additional investment **have changed** since the last submission of Know Your Client information or the time elapsed since the last submission **exceeds 24 months**, please complete section D and E in full.

   假若是次額外投資的資金匯出之銀行資料及引申投資金額的活動**有別於**最後一次提交的「客戶資料」，或者距離最後一次提交時**間已超過24個月**，請填寫整個D及E部分。

BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM 資金匯出之銀行資料

If you are making multiple payments from different sources, please photocopy this section, attach the details with this application form and tick here. ☐

如果供款是以多種繳付方式支付，請複印本部分，將資料與本申請表格一同呈交，並在此加上剔號。

▶ **The premium payment must come from an account held in the name of the applicant(s).**

▶ **供款必須來自申請者名下的帳戶。**

Payment amount
金額

Payment currency
貨幣

Bank account holder (name as stated on bank account)
銀行帳戶持有人（銀行賬戶名稱）

Bank account number/IBAN[7]
銀行帳號號碼／IBAN[7]

Sort code[8] (if applicable) - -
分類代號[8]（如適用）

SWIFT or BIC code[8] (if applicable)
SWIFT或BIC編號[8]（如適用）

[5] If unchanged, Know Your Client information is valid for a period of 24 months from the point of last submission.
如「客戶資料」沒有更改，最後一次提交時起計的有效期為24個月。

[6] Checks will be carried out against any previously submitted information, including ensuring that the source of funds covers any additional investment. We reserve the right to request more information or related documentary evidence as deemed necessary.
本公司會查證最後一次提交的任何資料，目的是確保資金來源涵蓋任何額外的投資。本公司保留權利，可以在認為有必要時要求更多資料或相關證明文件。

[7] IBAN stands for international bank account number and is always used in conjunction with a bank identifier code (BIC).
IBAN指國際銀行帳號，須與銀行識別碼(BIC)一併使用。

[8] A sort code is used in the UK in conjunction with a bank account number. A SWIFT code is used outside Europe in conjunction with a bank account number. A BIC code is used in Europe in conjunction with an IBAN.
分類代號英國是與銀行帳號一併使用。SWIFT編號在歐洲境外是與銀行帳號一併使用。BIC 編號於歐洲境內是與IBAN一併使用。

Bank name 銀行名稱	
Bank address 銀行地址	
	Postcode (if applicable) 郵區編號 (如適用)
Country 國家	
How long have you held this account? 您持有此帳戶多長時間?	years 年 months 月

E SOURCE OF FUNDS - ACTIVITY WHICH GENERATED AMOUNT TO BE INVESTED 資金來源 - 引申投資金額的活動

Utmost International Isle of Man Limited is required to record details of how the funds being invested have been accumulated.

本公司需要紀錄用作投資資金是如何累積的詳細資料。

Where your funds come from more than one source, you should complete all relevant sections to give us the full picture of its origin.

若您的資金來源來自多於一項,您應該填寫所有相關部份,以便我們全面了解其來源。

Documentary evidence requirements:

需要按要求提供證明文件:

For details of our documentary evidence requirements refer to our Anti-Money Laundering and Source of Wealth Requirements.

有關我們需要的證明文件要求,詳情參閱Anti-Money Laundering and Source of Wealth Requirements。

☐ **a. Accumulated Earned income (including salary, bonus and fees)**
累積已賺取收入(包括薪金、獎金及收費)

Total amount received **收取總金額**	Currency 貨幣 ___ Amount 總額 ___
Number of years income accumulated 收入累積年期	years 年
Institution holding the funds 存放資金的機構	
Name of account where funds have been held 存放資金的帳戶名稱	
Account number 帳戶號碼	
Length of time funds have been in this account 存放於上述號碼的年期	years 年 months 月
Nature of business 業務性質	

Main occupation during the accumulation period
累積收入期間的主要職業

(e.g. Director. If you have retired please include your occupation before retirement. Please check that the industry is not a high or very high risk industry as confirmed in our **Anti-Money Laundering and Source of Wealth Requirements**.
(例如：董事。如果您已退休，請包括退休前的職業。請查閱從事行業並非**反洗黑錢及財富來源要求**中被列為的高或極高風險行業 (Anti-Money Laundering and Source of Wealth Requirements)。)

Main employer's name
主要僱主名稱

Employer's address
僱主地址

Postcode 郵區編號

Average annual salary over the accumulation period
累積收入期間
的平均年度薪金

Currency 貨幣 | Amount 總額

Average annual bonus over the accumulation period
累積收入期間
的平均年度獎金

Currency 貨幣 | Amount 總額

☐ **b. Compensation**
賠償

Name of organisation or individual that paid compensation
賠償機構或人士的名稱

Reason for compensation
賠償原因

Country compensation was awarded
獲取賠償的國家

Total amount received
收款總額

Currency 貨幣 | Amount 總額

Date of received
收款日期

d d m m y y y y

☐ **c. Competition win**
比賽或博彩獎金

Name of competition organiser
比賽主辦機構名稱

Description of competition
比賽詳情

Country competition was held in 進行比賽的國家

Total amount won
贏取總金額

Currency
貨幣

Amount
總額

Date of win
贏取獎金額日期

d d m m y y y y

☐ **d. Gift**
饋贈

Full name of person who gave the gift
饋贈人的全名

Date of birth
出生日期

d d m m y y y y

Nationality
國籍

Address
地址

Postcode 郵區編號

Relationship to applicant
與申請人的關係

Reason for gift
饋贈原因

Description of gift
饋贈詳情

Total amount received
收款總額

Currency
貨幣

Amount
總額

Date received
收款日期

d d m m y y y y

☐ **e. Inheritance**
遺產

Deceased's full name 離世者全名	
Relationship to applicant 與申請人關係	
Date of death 離世日期	d d m m y y y y
Details of the inheritance 有關遺產的詳情 Tell us about the assets forming the inheritance (eg. cash, property, shares etc.) 請列出組成遺產的資產(例如:現金、物業、股票等)	
Amount received 收款總額	Currency 貨幣 ___ Amount 總額 ___
Date received 收款日期	d d m m y y y y
Solicitor/lawyer's (who dealt with the estate) name 處理遺產的律師名稱	
Solicitor/lawyer's firm name 律師行名稱	
Solicitor/lawyer's firm address 律師行地址	Postcode 郵區編號

☐ **f. Loan**
貸款

Name of loan provider 貸款機構名稱	
Address of loan provider 貸款機構地址	Postcode 郵區編號
Total amount borrowed 貸款總額	Currency 貨幣 ___ Amount 總額 ___
Date of loan 貸款日期	d d m m y y y y

☐ **g. Maturing policy/policy claim/replacement policy**
到期投資／計劃索償／轉保計劃

If the source of funds is the sale of an investment rather than maturity, please complete h instead.
如果資金來源是來自出售投資而非到期，請填寫 h項。

Name of policy provider
計劃供應商名稱

Address of policy provider
計劃供應商地址

Postcode 郵區編號

Policyholder's full name
保單持有人全名

Length of time policy held
持有計劃的年期

years 年 months 月

If the investment/policy being sold has been owned for less than 5 years, we need to understand the Source of Funds immediately prior to the purchase of the investment/policy. Please complete an additional relevant section to confirm this.
如所出售的投資/保單持有時間少於 5 年，我們需了解在購買該投資/保單之前的資金來源。請填寫額外的相關部分以確認詳情。

Reason for policy claim or replacement policy (if applicable)
計劃索償或轉保原因 (如適用)

Total amount received
收款總額

Currency
貨幣

Amount
總額

Surrender penalty (if applicable)
退保罰款 (如有)

Date received
收款日期

d d m m y y y y

☐ **h. Sale of asset portfolio or investment**
出售資產組合或投資

If the source of funds is a maturing investment rather than one that you are choosing to sell, please complete g instead.
如果資金來源是來自投資到期而非您選擇進行出售投資而非，請填寫g項。

Description of asset portfolio or investment (i.e. government bonds, equities etc.)
資產組合或投資詳情
(即政府債券、股權等)

Name of the company that held it
持有資產組合或投資

Registered address of company
的機構名稱及地址

Postcode 郵區編號

Account name
帳戶名稱

Length of time asset portfolio or investment held
持有資產組合或投資的年期

years 年 months 月

If the portfolio/investment being sold has been owned for less than 5 years, we need to understand the Source of Funds immediately prior to the purchase of the portfolio/investment. Please complete an additional relevant section to confirm this.
如所出售的資產組合或投資持有時間少於 5 年，我們需了解在購買該資產組合或投資之前的資金來源。請填寫額外的相關部分以確認詳情。

Date of sale
出售日期

d d m m y y y y

Net amount received
收取淨金額

Currency
貨幣

Amount
總額

i. Sale of interest in company
出售公司股份

Company name
公司名稱

Business sector
業務類別

Address of company
公司地址

Postcode 郵區編號

Your connection with the company
For example: owner, partner or shareholder
與公司的連繫 (例如: 擁有人、合伙人、股東等)

Date of sale
出售日期

d d m m y y y y

Sale amount
出售總額

Currency
貨幣

Amount
總額

Net amount received
The amount you have received after any deductions such as fees and taxes.
淨收款總額 扣減收費、律師費用等後

Currency
貨幣

Amount
總額

☐ **j. Sale of property**
出售物業

If you are not the beneficial owner of this property, please select a different option for source of funds that is more appropriate
如您不是物業的實益擁有人，請選擇更適合的「資金來源」選項

Address of property sold (including postcode if applicable)
售出物業地址
(如適用包括郵區編號)

Postcode 郵區編號

Length of time property owned
持有物業年期

years 年 months 月

If the property being sold has been owned for less than 5 years, we need to understand the Source of Funds immediately prior to the purchase of the property. Please complete an additional relevant section to confirm thi
如所出售的物業持有時間少於 5 年，我們需了解在購買該物業之前的資金來源。
請填寫額外的相關部分以確認詳情。

Date of sale
出售日期

d d m m y y y y

Total sale amount
出售總額

Currency 貨幣 Amount 總額

Net amount applicant received from sale
淨收款總額

Currency 貨幣 Amount 總額

☐ **k. Other**
其他

Description of the activity that generated the funds
產生財富的活動／項目詳情

Role in relation to above activities
您於上述活動／項目的角色

Period over which the activities occurred
上述活動／項目發生的時期

Country in which the activity occurred
上述活動／項目發生的國家

Date received
收款日期

years 年 months 月

Proceeds received from the activity
上述活動／項目產生的金額

Currency 貨幣 Amount 總額

F INVESTMENT DETAILS 投資詳情

PREMIUM PAYMENT 供款繳付

Please confirm the total amount to be invested below. If the investments are in multiple payment methods and in different currencies, please state the total in the chosen Policy currency at the latest applicable exchange rates.

請於下方確定總投資額。假若投資是以多種繳付方式及以不同貨幣支付，請以最近兌換率折算，以您選擇的保單貨幣為單位填寫總投資額。

Total anticipated investment amount
預期總投資額

Your chosen Policy currency
您已選擇的保單貨幣

Amount
總額

Please also list the payment methods of your total anticipated investment amount. For investment in multiple payment methods in particular, please detail the breakdown.

請列明預期總投資額的繳付方式。假若以多種繳付方式投資，請在下表列明詳情。

PAYMENT METHOD, EG CHEQUE, ELECTRONIC BANK TRANSFER, SHARE TRANSFER 繳付方式，例如支票、電匯及股份轉讓等	CURRENCY 貨幣	AMOUNT 總額	REFERENCE IF KNOWN, E.G. CHEQUE NUMBER. 參考資料（如知悉）例如支票號碼

- ▶ **The premium payment must come from an account or transferred assets held in the name of the applicant(s). Cheques should be made payable to Utmost International Isle of Man Limited.**
- ▶ 供款或資產轉讓必須來自申請者名下的帳戶。支票抬頭為 **Utmost International Isle of Man Limited**。
- ▶ **The minimum initial investment amount is £200,000 (or currency equivalent)**
- ▶ **The minimum additional investment amount is £2,500 (or currency equivalent), subject to the maximum aggregate amount of investment(s) of £10,000,000 (or currency equivalent).**
- ▶ **最低首次投資金額是英鎊 200,000 (或其他貨幣等值)**
- ▶ **最低額外投資金額是英鎊2,500(或其他貨幣等值)；但最高投資總額為英鎊10,000,000(或其他貨幣的等值)**

Please remember to enclose either your cheque, copy of receipt of your electronic bank transfer payment (for banking details see bank details and payment methods on the last page) or your assets transfer form (your financial adviser can provide you with the necessary details) with this application form.

請切記將支票、銀行電匯收據副本(請參閱本表格最後一頁有關銀行資料及付款方式詳情)或資產轉讓表格(您的財務顧問可提供必要的詳情)與本申請表格一同呈交。

Where you have chosen an authorised custodian, are you remitting your premium to be paid: (✓)

當您已經選擇授權託管人，您會匯款至(✓)：

☐ **to Utmost International Isle of Man Limited; or**
或 本公司；

☐ **via the authorised custodian**
由授權託管人以現金支付。

G INVESTMENT CHOICE 投資選擇

You or your fund adviser, if applicable, should provide any future investment instructions online via Wealth Interactive in the first instance. Alternatively, please use this section to list the investments which your premium should be invested in.

您或您的基金顧問(如適用)應先透過盈富互動在網上作出投資指示，另外亦可於本部分列出您的投資項目。

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Utmost International Isle of Man Limited does not provide investment advice and has no responsibility for the performance of your selection of investments. For individual/joint applicant, it is for you and your fund adviser to choose the investments most suitable for you. For corporate/trustee applicant, it is for you and your fund adviser and appointed custodian to choose the investment most suitable for you.

本公司不會提供投資建議，亦不對您所選的投資選擇之表現負責。就個人／聯名申請，您與您的基金顧問應選擇最適合您的投資；就企業／受託人申請，您與您的基金顧問及授權託管人應選擇最適合您的投資。

You do not need to complete this section if you have appointed an authorised custodian in Section A.

假若您在A部分已確認授權託管人，則毋須填寫此部分。

▶ The minimum amount, except as set by the respective fund managers, to be invested in any one investment is at least £2,500 (or currency equivalent)

▶ 除有關基金公司特別設定，投資任何一項資產的最少金額是英鎊2,500（或其他貨幣等值）

Investment restrictions

For full details of investment restrictions, please refer to the Policy Terms and Conditions and the local regulatory requirements applicable at the time. The list below shows the types of permissible investment.

投資限制

有關投資限制的詳情，請參閱「保單條款及條件」及當時本地監管要求。下表所列為本公司接受的投資類別。

- SFC-authorised funds 證監會認可基金
- listed securities 上市證券
- rated bonds 評級債券
- funds authorised or registered with financial regulators in jurisdictions which have entered into mutual recognition of funds arrangements with SFC 與證監會已訂立基金互認安排的司法管轄區之金融監管機構獲授權或註冊的基金
  (please see 請參閱 https://www.sfc.hk/en/Regulatory-functions/Products/List-of-publicly-offered-investment-products/Mutual-recognition-of-funds-arrangements)
- schemes as set out in the List of Recognised Jurisdiction Schemes as specified by SFC
  證監會指定的認可司法管轄區計劃名單中列出的計劃
  (please see 請參閱 https://www.sfc.hk/en/Regulatory-functions/Products/List-of-publicly-offered-investment-products/List-of-recognised-jurisdiction-schemes-and-inspection-regimes)

Please note if we do not receive sufficient details, this will delay your investment.

請注意，假若本公司未能收取足夠資料，您的投資會被延誤。

INVESTMENT CHOICE 投資選擇

SECURITY IDENTIFIER SEDOL/ISIN NUMBER 證券號碼 SEDOL/ISIN編號	SECURITY/FUND NAME – PLEASE ENTER NAMES IN FULL. 證券／基金名稱－請填寫全名。	ACCUMULATION/ INCOME UNIT REQUIREMENT (IF APPLICABLE) 累計／收入單位需求（如適用）	SHARE CLASS (IF APPLICABLE, FOR EXAMPLE A, B OR C) 股份類別（如適用，例如A、B或C）	BASE CURRENCY OF FUND (EG GBP, USD) 基金的基本貨幣（如英鎊、美元）	INVESTMENT % (WHOLE % NUMBERS ONLY) 投資%（僅限整數）
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
				Total: 總計：	%

▶ **A delay in investing your premium may occur if the instructions are illegible, unclear or relate to an asset which is not normally permitted. Please note that we are unable to backdate transactions resulting from the delay caused in clarifying your instructions.**

▶ **若投資指示字跡難以辨認、不清晰或涉及通常不允許的資產，可能會導致您的保費延遲投資。請注意，我們無法就因澄清指示所造成的交易延遲而追溯交易日期。**

In case we need to clarify the investment choice details above, please provide us with a contact name and telephone number.

為方便本公司在有需要確認以上的投資選擇詳情，請提供聯絡姓名及電話號碼。

Contact name
聯絡姓名

Telephone number including area code (daytime)
電話號碼包括區號（日間）

Fax number
傳真號碼

Telephone number including area code (evening)
電話號碼包括區號（晚上）

E-mail address
電郵地址

H REGULAR WITHDRAWALS (OPTIONAL) 定期提款（選擇性）

Please complete this section if you wish to receive regular withdrawals from your Policy.

假若您希望從保單中定期提款，請填寫本部分。

▶ **Please note that the minimum payment for any regular withdrawal payment, regardless of frequency, is £500 (or currency equivalent).**

▶ **請注意，不論定期提款次數，任何提款的最低提款額均為英鎊500（或其他貨幣等值）。**

WITHDRAWAL AMOUNT 提款額

Amount to be withdrawn **each year** 每年提款額（must be in base currency 需為保單貨幣）

or 或

Percentage of premium to be withdrawn **each year** 每年提取供款百分比 %

Percentage to be based on your (✓)
百分比是按照您已繳的 (✓)

☐ initial premium 首次供款 or 或 ☐ total premium invested in the Policy 或保單的總供款

Withdrawal frequency (✓)
提款次數 (✓)

☐ Monthly 每月 ☐ Every 2 months 每兩個月 ☐ Quarterly 每季 ☐ Half-yearly 每半年 ☐ Yearly 每年

Date of first payment[9] 首次提款日期[9] d d m m y y y y

Where you have requested the appointment of an authorised custodian, do you want Utmost International Isle of Man Limited to consider allowing the authorised custodian paying regular withdrawals on Utmost International Isle of Man Limited's behalf to you directly? Please tick (✓) ☐

假若您已經要求委任授權託管人，您是否希望本公司考慮允許授權託管人代表本公司直接支付定期提款予您?請加上剔號 (✓)

Please tick the below if it applies (✓)

如適用，請於以下位置加上剔號 (✓)

☐ If there is no nominated asset selected in the below section, I agree that the regular withdrawals will be paid out from the transaction account. We are unable to pay any withdrawals if there is insufficient fund in the transaction account.
如本人未有在以下部份選擇指定資產，本人同意定期提款將以交易帳戶中提取。假若交易帳戶內資金不足，我們不能派發定期提款。

[9] Your regular withdrawals will start on the next available date, and at the frequency you have requested, after your Policy has started. Therefore, if you have asked for your regular withdrawals on a monthly basis starting on 1 January and we received your application form and investment in December, but we were unable to start your Policy until the middle of January, then your first regular withdrawals will not be paid until 1 February.
您的定期提款將由您的保單成立後的下一個可付款日期開始，並按您要求的次數進行。因此，假若您要求由1月1日起每月定期提款，而本公司在12月收到您的申請表格及投資，但本公司在1月中才成立您的保單，這樣您於2月1日方會收到第一次定期提款。

NOMINATED ASSET(S) 指定資產

Please state which asset(s) listed in Section G is/are to be used as the Nominated Asset to pay regular withdrawals. This will only apply where you have not chosen an authorised custodian.

請指定列載於G部分用的資產項目以用作支付定期提款。只適用於未有選擇授權託管人。

Please note that you are required to keep a sufficient balance in your nominated asset to cover all withdrawals debited to your policy. Therefore we are unable to pay any withdrawals if there is an insufficient balance in your nominated asset.

請注意，您的指定資產須要預留足夠餘額，以支付由保單扣除的提款。假若指定資產餘額不足，我們不能付款。

▶ **If there are any further nominated assets, please photocopy this page, attach the details with this application form and tick here (✓)** ☐

▶ 假若有更多指定資產，請影印本頁，附上有關詳情連同本表格一併交回，並請在此加上剔號(✓)

ISIN/SEDOL ISIN/SEDOL 編號		Name 資產名稱		Percentage 百分比	%
ISIN/SEDOL ISIN/SEDOL 編號		Name 資產名稱		Percentage 百分比	%
ISIN/SEDOL ISIN/SEDOL 編號		Name 資產名稱		Percentage 百分比	%
ISIN/SEDOL ISIN/SEDOL 編號		Name 資產名稱		Percentage 百分比	%
ISIN/SEDOL ISIN/SEDOL 編號		Name 資產名稱		Percentage 百分比	%

PAYEE DETAILS 收款人資料

We will pay regular withdrawals to policyholders only. Please note that third party payments are not permitted. For Policies owned by two or more policyholders we will normally pay regular withdrawals to a bank account held jointly by all policyholders.

本公司只會發放定期提款予保單持有人，不會發放予第三方。如果保單由兩位或以上保單持有人擁有，我們通常會向所有保單持有人聯名擁有的銀行戶口定期付款。

▶ Do you want your withdrawals to be made to the same bank account detailed in Section D 'Source of funds'?

▶ 你是否希望本公司發放定期提款至D部分資金來源內所填寫的銀行戶口內?

☐ Yes 是 ☐ No 否

If 'No', please complete your chosen bank details below.

若'否'，請於下頁填寫所選銀行資料。

▶ Please note if the payee details below differ from the bank details you gave us relating to your original source of funds for your premium, as detailed in section D of this application form, then we may need additional documentation. This may delay the payment you have requested.

▶ 請注意，假若以下的收款人資料與本申請表格D部分就供款資金來源向本公司提供的銀行資料有別，本公司可能需要更多證明文件。您的提款可能會因而延誤。

Until further notice, I would like regular payments to be made to:

直至另外通知前，本人希望定期提款支付予：

Bank account holder (name as stated on bank account)
銀行帳戶持有人（銀行賬戶名稱）

Bank account number/IBAN[10]
銀行帳號號碼／IBAN[10]

Sort code[11] (applicable to UK accounts)
分類代號[11]（適用英國帳號）

__ __ - __ __ - __ __

SWIFT or BIC code[11]
SWIFT或BIC編號[11]

(SWIFT code needed for bank accounts outside Europe; BIC code needed for European accounts with an IBAN)

（SWIFT編號適用於歐洲境外的銀行帳號；BIC編號於歐洲境內是與IBAN一併使用）

Bank name 銀行名稱

Bank address 銀行地址

Postcode (if applicable) 郵區編號（如適用）

Country 國家

I NUMBER OF POLICIES 保單數目

NEW CONTRACTS ONLY 僅適用於首次投資

Please enter the number of policies you would like:

請填寫所需保單數目：

The number of policies cannot be changed after the policy is set up.

- We normally issue 12 policy schedules per contract. If you require more or less policy schedules, please insert the number required.
- The minimum investment amount for each individual policy is normally £5,000 (or currency equivalent).
- If you choose a number of policies which results in less than the minimum investment amount per policy, we will automatically reduce the number of policies to a level where a minimum investment amount per policy is achieved.

保單一經成立，保單數目不可變更。

- 我們一般就每份合約發出12張保單。假若需要多於或少於此數目，請填寫所需保單數目。
- 每一張個別保單的最低首次投資額為英鎊5,000（或其他貨幣等值）。
- 假若您所選擇的保單數目令每一保單的投資額低於每一張個別保單的最低首次投資額，本公司會自動減少保單數目，直至每一保單符合最低投資金額的要求。

[10] IBAN stands for international bank account number and is always used in conjunction with a bank identifier code (BIC).
IBAN指國際銀行帳號，須與銀行識別碼(BIC)一併使用。

[11] A sort code is used in the UK in conjunction with a bank account number. A SWIFT code is used outside Europe in conjunction with a bank account number. A BIC code is used in Europe in conjunction with an IBAN.
分類代號英國是與銀行帳號一併使用。SWIFT編號在歐洲境外是與銀行帳號一併使用。BIC 編號於歐洲境內是與IBAN一併使用。

 ULQ PR 10956 | 07/25

J FUND ADVISER 基金顧問

APPOINTING A FUND ADVISER TO YOUR UTMOST INTERNATIONAL ISLE OF MAN LIMITED POLICY
為您的保單委任基金顧問

Please tick as appropriate (✓)
請於適當位置加上剔號 (✓)

☐ I have not appointed a Fund Adviser and I will act on an "execution only basis" (where I have requested the appointment of an Authorised Custodian in section A, I also include a completed 'Request to transfer to an authorised custodian account'); or
本人沒有委任基金顧問，本人並會作出「只依據執行」行動（當本人在A部分要求委任授權託管人並已填妥「授權信」）；或

☐ I appoint a Fund Adviser and enclose a completed 'appointing a fund adviser' form and, where I have requested to appoint an Authorised Custodian in Section A but the Fund Adviser is not linked to the Authorised Custodian, a 'letter of authority'.
本人委任基金顧問並附上已填妥的《委任基金顧問》表格。若本人在A部分要求委任授權託管人，惟該基金顧問與授權託管人並沒有聯繫，本人亦已填妥「授權信」。

K UTMOST INTERNATIONAL ISLE OF MAN LIMITED CHARGES 本公司收費

▶ Before completing this section, please ask your financial adviser for a copy of the charge package details recommended to you.

The charge package for your policy is based upon the charge package code provided on your application; this will dictate the level, term and type of charges that apply and these will be confirmed to you in your policy documents. These charges will include our administration costs together with those incurred in making any renumeration to your Financial Adviser.

▶ 在填寫本部分前，請先向理財顧問索取已向您推介的收費詳情的副本作參考。

您的保單收費組合是根據申請表格上已提供的參考號碼而定。該收費組合決定適用於您的保單的收費金額、年期及類別，並會在保單文件中確認。收費亦包括我們的行政費用及支付佣金予您的理財顧問。

UTMOST INTERNATIONAL ISLE OF MAN LIMITED CHARGES 本公司收費

Please enter the code for the Utmost International Isle of Man Limited Charge package that your financial adviser has explained will apply to your Executive Investment Plan.

Do not use the illustration reference; only the appropriate Utmost International Isle of Man Limited charge package code should be used.

Failure to provide the right code could result in the incorrect package being applied and/or delays.

請填寫本公司收費號碼。這個收費組合已由理財顧問向您解釋，並適用於您的保單。請不要填寫退保說明參考號碼，
只有本公司收費號碼才適用。假若未能提供正確號碼，或會導致使用不正確收費組合或延遲申請。

The charge package cannot be changed after the policy is set up. It will also apply to any additional investment in the future.

保單一經成立，收費組合不可更改。這個收費組合將適用於任何日後作出的額外投資。

L DECLARATION AND APPLICATION 聲明及申請

IMPORTANT INFORMATION 重要資料

Please read the following sections carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Policy. A material fact is one which is likely to influence the assessment and acceptance of the application.

If you are uncertain whether a fact is material, you should give full details so that we can assess its possible significance. If you become aware of such a fact while we are considering your application, you should notify us immediately.

You should satisfy yourself that under any taxation, exchange control or insurance law to which you may be subject that you are able to effect the proposed contract.

請仔細閱讀以下各部分。

在此申請中遺漏或錯誤陳述任何重要事實，可能會影響保單的利益支付。重要事實是指可能會對評估及接受此申請造成影響的事實。

假若您不確定一項事實是否重要，便應提供全部詳情，令本公司得以評估可能的重要性。假若您在本公司考慮您的申請時得知該事實，應立即通知本公司。

您應自行確定，根據您受管限的任何稅務、外匯管制或保險法律，您能簽訂建議的合約。

DATA PRIVACY STATEMENT CONSENT BY EACH LIFE ASSURED AND THE APPLICANT
資料私隱聲明 - 每位受保人及申請者

I understand that Utmost Services Limited, Utmost International Business Services Limited, Utmost Services Ireland Limited, Utmost Administration Limited, Utmost International Isle of Man Limited, Utmost International Trustee Solutions Limited and / or Utmost PanEurope dac will process personal information about me and any other party whose personal information I have provided.

The type of personal information processed about me will depend on the purpose for which it has been collected and will include:

- my contact details
- information to verify my identity
- information about my family, lifestyle, health and finances
- my payment details.

The processing of my personal information may take place in a number of jurisdictions and may be shared with other parties within or outside the Utmost group of companies for the general purpose of establishing, maintaining and servicing an insurance policy. The sharing of my personal data may be used for any or all of the following purposes, to:

- check against credit reference or other databases to verify information provided for regulatory due diligence purposes and to prevent or detect financial crime including money laundering, terrorist financing, bribery and corruption, sanctions listing or fraud;
- allow for the provision of services relating to enhanced due diligence, underwriting, reinsurance, data hosting, online services, payment or reporting of any tax or levy, or any other services provided from time to time;
- enable an appointed financial adviser or fund adviser to assist in the provision of services to the policyholder;
- compile statistical analysis or market research, where information is not specific to the individual;
- comply with any legal obligation which includes the releasing of personal information to regulators, law enforcement authorities or other bodies where there is a legal requirement to do so, including the sharing of information under regulations relating to the U.S Foreign Account Tax Compliance Act and The Organisation for Economic Co-operation and Development Common Reporting Standards;
- enable an appointed discretionary asset manager or custodian to meet their legal or regulatory requirements, where that discretionary asset manager or custodian providing services in relation to a policy requests the personal data of an individual linked to an application, and where we are satisfied that such a discretionary asset manager or custodian has a legal or regulatory requirement to make such a request.

Where my personal information is shared with a third party for the provision of services relating to my policy, my personal information will only be used for the purposes for which it was collected. In some circumstances this may involve a transfer of my personal information to a third party outside the European Economic Area (EEA). Whenever my personal information is shared it will be subject to the same levels of security and protection that Utmost International Isle of Man Limited would apply.

I may ask Utmost International Isle of Man Limited to:

- provide a copy of personal information held about me and an explanation of how this data is processed;
- update or correct my personal information;
- delete information about me (where it is no longer necessary in relation to the purpose for which it was originally collected);
- restrict processing of my personal information where appropriate. I may also object to Utmost International Isle of Man Limited processing my data but understand that this may have consequences in Utmost International Isle of Man Limited being able to continue servicing my policy.

I have been made aware that a full explanation of how Utmost International Isle of Man Limited collects, uses and shares my personal information can be found at **www.utmostinternational.com/privacy-statements/**

If I have any questions about data privacy I can address these to:

For Utmost International Isle of Man Limited or Utmost International Trustee Solutions Limited: The Data Protection Officer, Utmost International Isle of Man Limited, King Edward Bay House, King Edward Road, Onchan, Isle of Man, British Isles, IM99 1NU.

Or email: IOM.DPO@utmostgroup.com

If I have a complaint about the processing of my personal information and Utmost International Isle of Man Limited is unable to provide a satisfactory response I may contact the appropriate regulator:

For Utmost International Isle of Man Limited or Utmost International Trustee Solutions Limited: The Isle of Man Information Commissioner, First Floor, Prospect Hill, Douglas, Isle of Man, British Isles, IM1 1ET.

As the Isle of Man is not part of the United Kingdom, our Appointed Representative in the United Kingdom is an establishment of Utmost Services Limited based at Saddlers House, 5th Floor, 44 Gutter Lane, London, EC2V 6BR.

I have read and understood the Data Privacy Statement set out above and will make it available to other individuals whose personal information has been provided by me to Utmost International Isle of Man Limited either in this application or within accompanying documentation.

本人了解Utmost Services Limited、Utmost International Business Services Limited、Utmost Services Ireland Limited、Utmost Administration Limited、Utmost International Isle of Man Limited、Utmost International Trustee Solutions Limited及/或Utmost PanEurope dac將處理有關本人及本人所提供的其他人士的個人資料。

獲處理與本人相關的個人資料類型將視乎其收集目的而定，並將包括：

- 本人的聯絡資訊
- 用於認證本人身份的資料
- 本人家庭、生活方式、健康與財政狀況的資料
- 本人的付款資料。

本人的個人資料處理可能於若干司法權區進行，亦可能與奧摩斯集團公司內外的其他人士共用，以作保單建立、維持及服務的一般用途。本人的個人資料分享可能用於任何或所有以下用途，以：

- 查證信貸資料或其他資料庫以認證所提供的資料，以作盡職審查用途，並防止或偵測金融罪案，包括洗黑錢、資助恐怖分子、貪污行賄、制裁名單或詐騙；
- 容許提供與加強盡職審查、核保、再保、數據託管、網上服務、支付或匯報任何稅項或徵費相關的服務，以及不時提供的任何其他服務；
- 允許獲委任的理財顧問或基金顧問協助向保單持有人提供服務；
- 編製統計分析或市場調查，而該等資料並非特指某個別人士；
- 遵循所有法律責任，包括向監管機構、執法機構或法例規定的其他機構提供個人資料，包括根據與美國的《海外賬戶稅收合規法案(FATCA)》及經濟合作與發展組織(OECD)與共同匯報標準(CRS)相關的法規分享資料；
- 讓獲委任的全權委託資產管理人或託管人能遵守法律或監管規例的規定，前提為提供與保單相關服務的全權委託資產管理人或託管人要求個別人士就一項申請提供個人資料，且吾等信納該酌情資產管理人或託管人乃遵從法律或規例規定作出有關要求。

當本人的個人資料就提供本人保單相關服務而與第三方共用時，本人的個人資料將只用於其收集用途。某些情況下，這可能涉及將本人的個人資料轉移至位於歐洲經濟區(EEA)以外的第三方。不論何時共用本人的個人資料時，Utmost International Isle of Man Limited將應用同等的保安及保護處理。

本人可要求 Utmost International Isle of Man Limited：

- 提供所持有關於本人的個人資料副本，並說明這些資料如何處理；
- 更新或修正本人的個人資料；
- 刪除與本人相關的資料(對於原本收集用途而言不再屬必需資料)；
- 在適當情況下限制處理本人的個人資料。本人亦可反對Utmost International Isle of Man Limited處理本人的資料，惟明白此舉可能對Utmost International Isle of Man Limited能否繼續為本人提供保單服務有所影響。

本人已知悉Utmost International Isle of Man Limited如何收集、使用及分享本人的個人資料的完整說明載於 www.utmostinternational.com/privacy-statements/。

如有任何關於資料私隱的問題，本人可以聯絡：

Utmost International Isle of Man Limited 或 Utmost International Trustee Solutions Limited: The Data Protection Officer, Utmost International Isle of Man Limited, King Edward Bay House, King Edward Road, Onchan, Isle of Man, British Isles, IM99 1NU。

或發電郵至：IOM.DPO@utmostgroup.com

如本人欲投訴有關處理本人個人資料之事而Utmost International Isle of Man Limited未能提供令本人滿意的回覆，本人可聯絡以下適合的監管機構：

Utmost International Isle of Man Limited 或 Utmost International Trustee Solutions Limited: The Isle of Man Information Commissioner, First Floor, Prospect Hill, Douglas, Isle of Man, British Isles, IM1 1ET。

由於馬恩島不屬於英國，我們在英國的委任代表是 Utmost Services Limited，地址為 Saddlers House, 5th Floor, 44 Gutter Lane, London, EC2V 6BR。

本人已閱畢並了解上文所載資料私隱聲明，並會將資料私隱聲明分享予其他由本人於本項申請或隨附文件中向Utmost International Isle of Man Limited提供其個人資料的人士。

DECLARATION – TO EACH APPLICANT 聲明－每位申請者作出

A copy of this completed application form is available on request.

References to the word 'I' in this declaration refer to:

1. Each applicant named in this application where they are individuals or individuals acting as trustees in relation to a trust; or
2. Each director/authorised signatory on behalf of the company where the applicant is a company, including where the applicant is a trust company.

已填妥的申請表格副本可因應要求提供。

於本聲明中，「本人」代表：

1. 於本申請中的每名申請者，不論他們是個人、或是於信託的情況中擔任受託人的人士。
2. 代表公司的每名董事／授權簽署人(若是企業申請者，包括申請者是信託公司)。

DECLARATION APPLICABLE TO ALL APPLICANTS

1. **I confirm that I have the expertise, experience and knowledge to adequately understand the features and risks associated with investing in the Executive Investment Plan.** I understand that Utmost International Isle of Man Limited will rely solely on my confirmation of my expertise, experience and knowledge, as part of their application acceptance criteria.
2. If I consider myself to no longer have the expertise, experience and knowledge in the future, I understand that Utmost International Isle of Man Limited will not restrict the choice of assets available and that it is mine and my financial adviser's responsibility to review the continued suitability of the chosen assets.
3. In addition to my confirmation above of my expertise, experience and knowledge, for the purpose of local regulatory requirements, I further confirm I am a Professional Investor (as defined in the Securities and Futures Ordinance) and have submitted the relevant Professional Investor declaration as specified by Utmost International Isle of Man Limited. I undertake to inform Utmost International Isle of Man Limited to update the relevant records should there be any change to my status as a Professional Investor in future.
4. I may wish to invest into professional/non-retail assets and, if so, I will make sure that I have had the opportunity to read the relevant offering documents of the assets of this nature. Where I decide to invest in professional/non-retail assets, I accept the level of risk associated with these, including the risk that the investment into such assets could:
   a. provide a lesser degree of investor protection and regulatory safeguards;
   b. result in a loss of significant proportion of some or all of the sums invested; and
   c. have a minimum duration, impose significant redemption penalties or are illiquid.
5. I understand that I will have an Online Service Account set up, should I wish to activate it. If I do activate my Online Service Account, whilst I am submitting this application through my financial adviser to your Head Office, I agree that:
   a. I will apply for and sign onto my Online Service Account; and
   b. all Policy Transactions will be made by me using my Online Service Account where the Online Service allows, unless I have requested otherwise; and
   c. all communications from you will be through my Online Service Account where the Online Service allows, unless I have requested otherwise.
6. I understand and agree that I am applying to enter a contract with Utmost International Isle of Man Limited, and it will be subject to Isle of Man law and the Policy Terms will be in the English language.

7. a. If a policy number is not shown in section A of this form, I request that the amount shown in section F be invested as an initial premium for policies comprising an Executive Investment Plan and request Utmost International Isle of Man Limited to issue the policies in:

    i. my name, jointly with other applicants, if applicable; or

    ii. in the name of the company, if applicable; or

    iii. in the name of the trust, if applicable.

   b. I request that the amount shown in section F be invested as an additional premium for the policies currently in force bearing policy numbers consisting of the policy number, as shown in section A of this form, followed by two more digits.

8. I declare to the best of my knowledge and belief that the statements made in this application, and any related documents, are true and complete and I have not concealed a material fact. I agree to provide Utmost International Isle of Man Limited with any further information in respect of the application on request.

9. I confirm that Utmost International Isle of Man Limited has not provided any investment advice and I or my fund adviser are responsible for the selection of assets to be linked to the Portfolio Fund. I acknowledge that Utmost International Isle of Man Limited does not have any responsibility for the management of the assets chosen and does not recommend any asset as a suitable investment.

10. I confirm that I am not resident in the United States of America or any of its territories. Where the applicant is a corporation/trust company, the corporation/trust company is not incorporated in the United States of America or its territories.

11. If I become resident, or where the applicant is a corporation/trust company, the corporation/trust company becomes incorporated in the United States of America or its territories, I understand that Utmost International Isle of Man Limited will not accept any further premiums until after I cease to be a resident of the United States of America or its territories, or the corporation/trust company, ceases to be incorporated in the United States of America or its territories.

12. I confirm that I have received a copy of the product brochure and product key facts statement of the Executive Investment Plan and I have had the opportunity to read them when completing this application form.

13. I authorise and request Utmost International Isle of Man Limited to effect the regular withdrawal transaction details in section H and confirm that such payments to the company will discharge Utmost International Isle of Man Limited from all liabilities and claims arising from those regular withdrawals. I understand that this authority supersedes any authority previously given.

14. I understand that in cases where the asset(s) I have selected is/are not redeemable for a certain period of time, Utmost International Isle of Man Limited may not be able to return that part of my payment until the end of that period. The description of the funds and/or assets I have chosen will give details if this applies. I may invest immediately into non-daily dealing funds with the understanding that in the event of cancellation or requiring early access that:

    a. I may not get my money back immediately and payment may be delayed for some time;

    b. the institution may impose penalties and therefore I may get back less than the amount I invested, and/or

    c. the only way in which to receive value may be through an in-specie transfer of that asset into the name of the Policyholder.

15. I confirm that each life assured (or parent where parental consent is required) consents to this application, an insurable interest exists and agrees to my acting on their behalf for the purpose of the information provided in this application.

16. I am aware of the charges payable on the Policy, including the charges payable in respect of the investments which may be held within it. I understand the charges exist partly to meet advice, promotion and distribution expenses. These may include initial and on-going payments (such as commission) made to my financial adviser. These payments could be in addition to any commission payable by the investment provider to my financial adviser in respect of the investments held. I understand that Utmost International Isle of Man Limited may receive payments in the form of fund manager rebates, from an investment provider in respect of the investments held, and which Utmost International Isle of Man Limited may share with my financial adviser.

17. The premium detailed in this application and any other premium tendered in respect of this application are derived solely from the source of funding provided and have, where required, been declared to the relevant tax authority in my country of residence for taxation.

18. The application for an Utmost International Isle of Man Limited policy is not being made for the purpose of concealing funds, assets or wealth with a view to the evasion of any taxes I am obliged to pay.

19. I appoint the financial adviser specified on page 3 of my application form to act on my behalf in accordance with the Policy Terms and Conditions. I have completed the **Financial Needs Analysis**, **Risk Profile Questionnaire**, and **Important Facts Statement and Applicant's Declarations**. The documents have been supplied to my financial adviser.

ADDITIONAL DECLARATIONS APPLICABLE TO CORPORATE APPLICANTS:

20. I, as director of the company, confirm the investment into an Executive Investment Plan is within the powers available to me as directors of the company.
21. I confirm that the company has not been or is not in the process of being dissolved, struck off, wound-up or terminated.
22. I confirm that the company shares are not held in bearer form and will not be converted to bearer share form.

ADDITIONAL DECLARATIONS APPLICABLE TO TRUSTEE APPLICANTS:

23. I confirm that the investment into an Executive Investment Plan is within the investment powers available to us as trustee of the trust.
24. For a corporate trustee application, I confirm that the trust company has not been, or is not in the process of being, dissolved, struck off, wound up or terminated.
25. For a corporate trustee application, I confirm that the company shares are not held in bearer form and will not be converted to bearer share form.

適用於所有申請者聲明：

1. **本人確認本人具有專門知識、經驗和理解，以充分瞭解全才投資相連計劃的產品特點及投資於其的相關風險**。本人明白Utmost International Isle of Man Limited將只會依靠本人就本人的專門知識、經驗和理解的確認，作為接納本申請的準則之一。
2. 若日後本人認為本人不再擁有專門知識、經驗和理解，本人明白Utmost International Isle of Man Limited將不會限制本人可選取的資產，而本人及本人之理財顧問有責任檢視所選資產的持續合適性。
3. 除以上本人已確認本人具有專門知識、經驗和理解，就本地規管要求所需，本人進一步確認根據證券及期貨條例，本人為專業投資者並已遞交Utmost International Isle of Man Limited所訂的專業投資者聲明。本人確認若本人的專業投資者的狀況於日後改變，本人會通知Utmost International Isle of Man Limited以更新有關紀錄。
4. 本人可能希望投資專業／非零售資產；在此情況下，本人會確保本人有機會細閱這類資產的相關銷售文件。若本人決定投資於專業／非零售資產，本人將接受與這類資產相關的風險水平，包括投資此類資產的風險可能會：
   a. 提供較低程度的投資者保護和監管保障；
   b. 導致部分或全部的投資金額的重大損失；及
   c. 有一段最少時期需面臨重大的贖回罰款或缺乏流動性。
5. 本人明白網上服務戶口會開設予本人，並會啟動該戶口。假若本人啟動網上服務戶口，代表本人的理財顧問將會透過該戶口遞交本申請至Utmost International Isle of Man Limited的總辦事處。本人並同意：
   a. 本人會申請並簽署本人的網上服務戶口；及
   b. 除非本人特別要求，當網上服務容許時，本人會使用本人的網上服務戶口進行所有保單交易；及
   c. 除非本人特別要求，當網上服務容許時，所有由Utmost International Isle of Man Limited發出的通訊會透過網上服務戶口發送予本人。
6. 本人明白並同意本人申請與Utmost International Isle of Man Limited訂立的合約將受馬恩島法律管限，而保單條款及條件將以英文表達。
7. a. 如果保單編號並沒有在表格的A部分呈示，本人要求F部分呈示的金額用於投資，作為全才投資相連計劃保單的首次供款，並要求Utmost International Isle of Man Limited以下列名義發出保單：
      i. 本人名義、聯同其他申請者（如有）、或
      ii. 企業名義（如適用）、或
      iii. 信託名義（如適用）
   b. 本人要求F部分呈示的金額用於投資，投資於現有保單編號作為額外供款。保單編號見表格A部分，其後是兩個或以上數字。
8. 本人聲明，就本人所盡知及所盡信，在這申請所作陳述以及任何相關文件均為真確完整，而本人並未隱瞞任何重要事實。因應Utmost International Isle of Man Limited要求，本人同意就本申請提供更多資料。
9. 本人確認Utmost International Isle of Man Limited並無提供任何投資建議，本人對因應戶口而投資的組合基金價值相關的資產選擇負責。本人明白Utmost International Isle of Man Limited對於相關所選資產的管理並無任何責任，也沒有提議任何資產作為合適投資。
10. 本人確認本人並非美國或其屬土居民。若申請者是企業／信託公司，則企業／信託公司並非於美國或其屬土註冊。

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11. 假若本人成為美國或其屬土居民，或企業／信託公司於美國或其屬土註冊（若申請者是企業／信託公司），Utmost International Isle of Man Limited或不能夠繼續接受任何供款，直至本人不再是美國或其屬土居民為止或企業／信託公司終止於美國或其屬土註冊。
12. 本人確認本人已收到一份《全才投資相連計劃》產品說明書及產品資料概要。而本人在填寫本申請表格前已有機會加以閱讀。
13. 本人授權並要求Utmost International Isle of Man Limited進行H部分所詳述的交易，並確認Utmost International Isle of Man Limited作該等付款時可免除該等定期提款所引致的一切責任及申索。本人明白此項授權取代先前作出的任何授權。
14. 本人明白，假若本人所選擇的資產不能在一定時間內可贖回，Utmost International Isle of Man Limited在該段時間內或會未能套回該部分款項。假若該情況適用，本人所選擇的基金及／或資產資料會提供詳情。本人或會投資於非每日交易的基金，並明白當要求撤回投資或提早贖回時，本人：
    a. 或會未能立即取回款項並會受延遲；
    b. 投資機構或會徵收罰款，本人或會取回少於投資款項的金額，及／或；
    c. 唯一可以收取價值的方法，或會是通過本人名義該資產轉移至實物。
15. 本人確認每一受保人（如需父母同意則為其父或母）均同意這份申請及存在可保權益，並同意本人代表提供申請所需資料。
16. 本人注意到須就保單繳付費用，包括與投資相關而鎖定其中的費用。本人明白有關費用部份會用作支付提供咨詢服務、推廣及分銷等開支。當中可能包括繳付予本人理財顧問的首次收費及持續收費（如佣金）。這些費用可能是投資機構就有關投資支付予本人理財顧問佣金以外的額外費用。本人明白Utmost International Isle of Man Limited可能會收到由持有投資的投資供應商以基金經理回贈形式的款項，而Utmost International Isle of Man Limited可與本人的理財顧問分享該款項。
17. 本申請內詳述的供款及就本申請提交的任何其他供款，均來自所列明的資金來源，並已按規定（如有）向本人徵稅居住國家的相關稅務部門作出聲明。
18. 本人申請Utmost International Isle of Man Limited的保單，並非為了隱瞞任何資金、資產或財富，藉以迴避本人應繳納的任何稅項。
19. 本人現委任申請表格第三頁所列的理財顧問，代表本人根據保單條款及條件行事。本人已完成**財務需要分析、風險承擔能力問卷、及重要資料聲明書及申請人聲明書**。該等文件已提供予本人的理財顧問。

適用於企業申請者的其他聲明：

20. 本人，作為公司的董事，確認投資於全才投資相連計劃乃是本人作為公司的董事的權力範圍之內。
21. 本人確認，公司並未解散、清算、清盤或終止，且並非進行相關程序中。
22. 本人確認公司股分並非以不記名形式持有，亦不會轉換為不記名形式。

適用於受託人申請者的其他聲明：

23. 本人確認投資於全才投資相連計劃乃屬於我們作為信託受託人的投資權力範圍之內。
24. 對企業受託人申請而言，本人確認公司並未解散、清算、清盤或終止，且並非進行相關程序中。
25. 對企業受託人申請而言，本人確認公司股分並非以不記名形式持有，亦不會轉換為不記名形式。

APPOINTMENT OF A LEAD POLICYHOLDER – APPLICABLE IF THERE IS MORE THAN ONE APPLICANT OR WHERE THE APPLICANT IS A COMPANY OR TRUSTEE
委任首要保單持有人－適用於多於一名申請者、申請者為企業或受託人

1. I agree to the appointment of the Lead Policyholder, who is named in this application, for the policies comprising our Utmost International Isle of Man Limited Policy in accordance with the Policy Terms.
2. I understand that this appointment is revocable and can be changed at any time (as explained in the Policy Terms).
3. I understand that by agreeing to the appointment of the Lead Policyholder I authorise the Lead Policyholder to provide Utmost International Isle of Man Limited with instructions to carry out and request certain Policy Transactions on behalf of all Policyholders. The instruction or request shall be deemed to have been addressed, sent and authorised on behalf of all Policyholders.
4. I understand that these instructions will be legally binding and that Utmost International Isle of Man Limited can act on instructions received from the Lead Policyholder.
5. Where the policyholder is a company, I confirm that it has authority to delegate all decisions on behalf of the company to the Lead Policyholder.
6. Where the policyholder is a trust, I confirm that the provisions of the trust allow delegation of authority to one trustee to act on behalf of all trustees.

1. 本人同意委任在本申請被命名的首要保單持有人，根據保單條款成立Utmost International Isle of Man Limited保單。
2. 本人明白該委任屬可撤銷的，任何時候均可以改變委任(須根據保單條款之解說)。
3. 本人明白透過委任首要保單持有人，本人授權予首要保單持有人代表所有保單持有人向Utmost International Isle of Man Limited提供指令，以執行及要求進行保單交易。指令或要求應被視為代表所有保單持有人發表、傳遞及授權。
4. 本人明白有關指令受法律限制，Utmost International Isle of Man Limited經由首要保單持有人接收指令後執行該指令。
5. 若保單持有人是公司，本人確認其有權代表公司將所有決定權委託予主要保單持有人。
6. 若保單持有人是信託，本人確認信託的條文允許授權一名受託人代表所有受託人行事。

CANCELLATION RIGHTS AND REFUND OF PREMIUM(S) WITHIN COOLING-OFF PERIOD
冷靜期內取消保單的權利及退還保費

I understand that under Hong Kong requirements, I have the right to cancel my policy and obtain a refund of any initial premium(s) paid less any market value adjustment by giving written notice to Utmost International Isle of Man Limited to request cancellation, or notifying Utmost International Isle of Man Limited through my Online Service Account. I understand that to exercise this right, this written notice must be signed by me and received directly by Utmost International Isle of Man Limited's Hong Kong office at Unit 2402C, Great Eagle Centre, 23 Harbour Road, Wanchai, Hong Kong, within the Cooling-off Period. I understand that the Cooling-off Period is the period of <u>21 calendar days</u> immediately following either the day of delivery of the policy or the Cooling-off Notice to me or my representative, whichever is earlier. I understand that the Cooling-off Notice is to notify me of the Cooling-off Period around the time the policy is delivered.

I understand that under Isle of Man requirements, I have the right to cancel my policy where an initial premium has been paid only, and cancel the additional investment (if any) and obtain a refund of the relevant premium paid less any market value adjustment. The notice of cancellation from me must be received by Utmost International Isle of Man Limited within 30 days after my receipt of the policy and any accompanying pre-contractual information, and in the case of additional investment, 30 days after my receipt of the confirmation document of the additional investment.

I am deemed to receive the document within standard postal delivery timescales, which are generally expected to be seven calendar days after Utmost International Isle of Man Limited has despatched the document. If I have an Online Service Account, I understand that I will be notified by email and I am deemed to receive the email and document on the date they are sent by Utmost International Isle of Man Limited.

I understand that the premium(s) to be refunded is after a deduction of the amount (if any) by which the value of my investment has fallen at the time when my cancellation letter/notice is received by Utmost International Isle of Man Limited.

本人明白，按香港的規定，本人有權取消保單，並向Utmost International Isle of Man Limited給予取消保單的書面通知或透過網上服務戶口通知Utmost International Isle of Man Limited而取回扣除市值調整後的已繳供款。本人明白為行使這項權利，此書面通知必須經本人簽署且由Utmost International Isle of Man Limited的香港辦事處直接收取，地址為香港灣仔港灣道23號鷹君中心2402C室，且於冷靜期內收到。本人明白冷靜期為緊接保單或冷靜期通知書交付予本人或本人的代表之日起計的 <u>21個曆日</u>的期間，以較早者為準。本人明白冷靜期通知書是由Utmost International Isle of Man Limited在交付保單時致予本人或本人的代表的一份通知書，以就冷靜期 一事通知本人。

本人明白，按馬恩島規定，本人有權取消只繳付首筆供款的計劃，及取消額外投資(如有)，並取回扣除市值調整後該已繳供款。本人須於收妥保單及任何合約訂定前文件後30天內，或如屬額外投資則為收妥確認文件後30天內，通知Utmost International Isle of Man Limited取消該供款。

本人會在一般郵遞時標內被視為已收妥文件，即Utmost International Isle of Man Limited寄出文件7個曆日後。如本人有網上服務戶口，本人明白會以電郵被通知，並被視為於Utmost International Isle of Man Limited發出電郵當天已收妥電郵及文件。

本人明白退還的供款會扣減按Utmost International Isle of Man Limited收到本人的取消函件／通知時，本人的投資下跌之金額(如適用)。

INSURANCE BROKER COMMISSION 保險經紀佣金

I understand, acknowledge and agree that, as a result of my purchasing and taking up the policy to be issued by Utmost International Isle of Man Limited, Utmost International Isle of Man Limited will pay the authorised insurance broker commission during the continuance of the policy including renewals, for arranging the said policy. Where I am a corporate body, the authorised person who signs on behalf of me further confirms to Utmost International Isle of Man Limited that he or she is authorised to do so.

I further understand that the above agreement is necessary for Utmost International Isle of Man Limited to proceed with the application.

本人明白、確知及同意，Utmost International Isle of Man Limited會就本人購買及接受Utmost International Isle of Man Limited簽發的保單，於保單有效期內（包括續保期），向負責安排有關保單的獲授權保險經紀支付佣金。假如本人為法人團體，代表本人簽署的獲授權人員須向Utmost International Isle of Man Limited確認他／她已獲法人團體授權簽署。

本人亦明白Utmost International Isle of Man Limited必須取得本人以上的同意，才可以處理有關申請。

This application must be completed by the applicant(s) unless you have asked your financial adviser to complete it.

本申請必須由申請者填寫，除非您要求由理財顧問填寫。

Did you complete this application form yourself? ☐ Yes 是 ☐ No 否

您是否親自填寫本申請表格?

If No, did a third party, such as your financial adviser, complete it on your behalf? ☐ Yes 是 ☐ No 否

假若為否，是否由第三方如您的理財顧問代表填寫?

Please enter the country in which this application form was signed. ______

請指明簽署本申請表時所身處的國家

By signing this declaration you confirm that you have read through the above declaration and, if a third party has completed the application form on your behalf, that all the information provided in it is correct.

簽署本聲明後，您即確認已細閱以上聲明，而倘若申請表格是由第三方代替填寫，提供的所有資料均正確無誤。

	Applicant/Authorised Signatory 1 申請者／授權簽署人1	Applicant/Authorised Signatory 2[12] 申請者／授權簽署人2[12]
SIGNATURE 簽署		
Date 日期	d d m m y y y y	d d m m y y y y

	Applicant/Authorised Signatory 3[12] 申請者／授權簽署人3[12]	Applicant/Authorised Signatory 4[12] 申請者／授權簽署人4[12]
SIGNATURE 簽署		
Date 日期	d d m m y y y y	d d m m y y y y

Copies of the Policy Terms and Conditions and/or this completed application form are available on request.

「保單條款及條件」及／或經填妥的申請表格副本均可因應要求提供。

[12] If applicable
如適用

M VERIFICATION OF CUSTOMER IDENTITY – FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE – THIS SECTION APPLIES TO ALL APPLICANT TYPES
客戶身份核證 — 由理財顧問／合適核證人填寫 — 所有類別申請者均需填寫此部分

NOTE

When certifying copies of original document, the suitable certifier must provide the following:

- a statement to the effect that "**I hereby confirm that this document is a true copy of the original which I have sighted and the photograph represents a true likeness of the client**"
- his/her full name, company name and position
- signature and the date of certification
- phone number and email address

請注意

合適核證人核證文件為正本的真實副本時，文件上需有以下資料：

- 加上"**I hereby confirm that this document is a true copy of the original which I have sighted and the photograph represents a true likeness of the client**"字句。中文翻譯為「本人謹此確認此文件已核證為正本的真實副本，而該照片與客戶的真實肖像相似。」請注意，由於申請表格會交由位於馬恩島的總公司處理，因此核證字句必須以英文填寫。不便之處，敬請見諒。
- 合適核證人全名、公司名稱及職位
- 簽署及核證日期
- 電話號碼及電郵地址

PART A – FINANCIAL CRIME – RISK RATING
*A*節 — 金融罪案－風險評估

As part of the global efforts to prevent financial crime, Isle of Man authorised life companies adopt a 'risk-based approach' when obtaining evidence of the source of a client's wealth. This does not question the quality of the investment. It is a safeguard that will benefit the industry as a whole and ultimately protect the client as an investor.

In order to decide what risk rating applies to your client's investment you need to take into account the following factors:

為防止全球金融罪案活動，馬恩島的壽險公司在收取客戶財富來源時採取「風險為本政策」。此舉不應被視為對投資的性質有所懷疑，此屬保障措施，有利於整個行業，及最終保障您的客戶。

為決定貴客戶的投資所屬的風險評級，您須考慮以下因素：

a. your client's country of residence 客戶居住國家

b. which country the premium is paid from 供款來源國家

(a) + (b) = total risk rating 總風險評級

Please refer to the 'Source of Funds and Source of Wealth guidelines' (available from Utmost International Isle of Man Limited) for information on how to complete the table below.

請參閱本公司提供的「資金來源及財富來源指引 (Source of Funds and Source of Wealth guidelines) 」以填寫下列資料。

APPLICANT 申請者	CLIENT COUNTRY OF RESIDENCE (A) 客戶居住國家(A)	COUNTRY OF PREMIUM FUNDING (B) 供款來源國家(B)	TOTAL RISK RATING 總風險評級
Example 例子 Hong Kong	Hong Kong 香港 (1)	Hong Kong 香港 (1)	2

This procedure is for guidance only.

Each new application, or application for an additional investment, will be reviewed individually.

Utmost International Isle of Man Limited reserves the right to request further documentation if it is felt appropriate.

If you are unsure about a particular application, please contact our Utmost International Isle of Man Limited regional office.

此程序僅供指引之用。

每個新申請或額外投資申請會被個別審核。

Utmost International Isle of Man Limited保留權利，可以在認為適當的時候要求額外文件證明。

假若您對個別申請有疑問，請與Utmost International Isle of Man Limited辦事處聯絡。

Outlined on this page is the standard minimum requirements. In some circumstances we may need additional information.

We require one document from part B and one from part C. If neither document in part B is available, please provide the reason why and provide two formal documents showing appropriate personal details and verifiable reference numbers from part C.

下一頁概述各項是最低標準要求。在若干情況下，本公司可能需要額外資料。

本公司需要B節及C節的文件各一份。假若未能提供B節文件，請列明理由，並從C節提供兩份顯示適當個人資料及可核證參考編號的正式文件。

Identification documentation should be current and valid. Evidence of address should be the latest available, but no more than six months old.

身份證明文件應為現時持有並有效。地址證明應為最近期及須於最近六個月內發出。

▶ Please indicate the identification you have supplied for each individual party to the policy. If a fund adviser has been appointed we may need to verify their identity.

▶ 請指明各個別人士所提供的身份證明。如果委任基金顧問，本公司可能需要核實受委人的身份。

PART B – INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED
B節 — 被核實身份的個別人士

1. Name 姓名: ____
   Capacity 身份／職位: ____
   Type of document 文件類別: ☐ Passport 護照 ☐ National identity card[13] 身份證[13]
   Document reference 文件參考編號: ____

2. Name 姓名: ____
   Capacity 身份／職位: ____
   Type of document 文件類別: ☐ Passport 護照 ☐ National identity card[13] 身份證[13]
   Document reference 文件參考編號: ____

3. Name 姓名: ____
   Capacity 身份／職位: ____
   Type of document 文件類別: ☐ Passport 護照 ☐ National identity card[13] 身份證[13]
   Document reference 文件參考編號: ____

4. Name 姓名: ____
   Capacity 身份／職位: ____
   Type of document 文件類別: ☐ Passport 護照 ☐ National identity card[13] 身份證[13]
   Document reference 文件參考編號: ____

Reasons why documents are not provided (if applicable) 未能提供文件的理由（如適用）

____

[13] For applicant who is Hong Kong **permanent** resident, the individual has to provide us with the Hong Kong identity card number as a minimum requirement. For applicant who is not Hong Kong permanent resident, please provide the Hong Kong identity card/passport/national identity card number as appropriate. The financial adviser/suitable certifier has to verify the relevant document accordingly.
屬香港**永久**居民的申請者須至少提供香港身份證號碼。不屬香港永久居民的申請者請提供香港身份證／護照號碼／身份證號碼。理財顧問／合適核證人必須相應地驗證相關文件。

PART C – INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED
C節 — 被核實身份的個別人士

These must be less than six months old **此等文件須於最近六個月內發出**	1	2	3	4
1. A recent utility, rates or council tax bill (mobile/cell phone bills not acceptable) 最近公用事業單據、差餉費單或稅單(不接受流動電話費單)	☐	☐	☐	☐
2. A recent mortgage statement, giving the residential address 最近的按揭貸款單據,並註明居住地址	☐	☐	☐	☐
3. An extract from the official register of electors 選民登記冊摘錄	☐	☐	☐	☐
4. A state pension, benefit or other government produced document showing benefit entitlement 政府退休金、福利金或其他由政府發出可顯示合法利益享有權的文件	☐	☐	☐	☐
5. A recent tax assessment document 最近的課稅文件	☐	☐	☐	☐
6. A recent account statement from bank or credit card (store cards not acceptable) 最近的銀行或信用卡結算單(不接受商店購物卡)	☐	☐	☐	☐

If there are more than four individuals concerned, please photocopy this page, attach the details with this application form and tick here (✓) ☐

如果多於四名有關個別人士,請複印本頁,將資料與本申請表格一同呈交,並在此加上剔號 (✓)

M1 VERIFICATION OF CUSTOMER IDENTITY – FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE – ADDITIONAL INFORMATION FOR NON-CORPORATE TRUSTEE APPLICANTS 客戶身份核證 — 由理財顧問／合適核證人填寫 — 非企業受託人申請者額外資料

Enclosed 附件 (✓)

1. Verification of the identity and address of all individual trustees – please complete part B and C of section M. ☐
   所有受託人的身份核證 – 請填妥M部份之B及C節。
2. Verification of the identity and address of the settlor. ☐
   委託人身份核證及地址證明。
3. Verification of the identity and address of the protector (if any). ☐
   保護人身份核證及地址證明(如有)。
4. Evidence of the appointment of trustees (for example a certified copy of an extract from the trust deed, but not the whole deed) if the application is in respect of an existing trust. ☐
   如為現有信託,請提交委任受託人的證明(例如信託契約相關摘要的副本,而非整份信託契約的副本)。
5. The trustees (settlor(s) where policies to be settled into trust) should provide the name, current residential address and date of birth or death for all the parties to the trust, for example settlor/donor, protector, beneficiaries. If the beneficiaries are not named you must provide the class of beneficiaries, for example grandchildren. ☐
   受託人(若以信託形式結算則為委託人)應提供信託相關人士(例如委託人／捐贈人、保護人、受益人)的姓名、現時居住地址和出生日期／死亡日期。若受益人尚未有名稱,您必須提供受益人類別,例如孫子女。

Capacity (✓) 身份／職位: ☐ Settlor/Donor 委託人／捐贈人 ☐ Protector 保護人 ☐ Beneficiary 受益人

Name 姓名: ____________________

Date of birth or death 出生／死亡日期: d d m m y y y y ☐ Birth 出生 ☐ Death 死亡

Residential Address 居住地址: ____________________

Postcode 郵區編號: ____________________

Capacity (✓) 身份／職位 ☐ Settlor/Donor 委託人／捐贈人 ☐ Protector 保護人 ☐ Beneficiary 受益人

Name 姓名

Date of birth or death 出生／死亡日期 d d m m y y y y ☐ Birth 出生 ☐ Death 死亡

Residential Address 居住地址

Postcode 郵區編號

Capacity (✓) 身份／職位 ☐ Settlor/Donor 委託人／捐贈人 ☐ Protector 保護人 ☐ Beneficiary 受益人

Name 姓名

Date of birth or death 出生／死亡日期 d d m m y y y y ☐ Birth 出生 ☐ Death 死亡

Residential Address 居住地址

Postcode 郵區編號

Class of beneficiary if not named (an extract of the deed may be provided)

若受益人尚未有名稱，請提供受益人類別（可提供契約相關摘要）

You may also wish to provide identification documentation at the time of application/assignment for the named parties to the trust (for example, beneficiaries) in order to avoid delays on subsequent transactions where documentary evidence is required.

您可於提出申請／轉讓時提供信託各方的身份證明文件（例如：受益人），以避免日後因為需要提交書面證據而出現交易延誤。

If there are more parties to the trust, please photocopy this page, attach the details with this application form and tick here (✓) ☐

如果尚有其他信託相關人士，請複印本頁，將資料與本申請表格一同呈交，並在此加上剔號 (✓)

M2 VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE - ADDITIONAL INFORMATION FOR CORPORATE/CORPORATE TRUSTEE APPLICANTS 客戶身份核證－由理財顧問／合適核證人填寫 － 企業／企業受託人申請者額外資料

Enclosed 附件 (✓)

1. Certified copy of the Certificate of Incorporation or the other official registration document.
   公司註冊證明或其他正式註冊文件的核證副本。 ☐
2. Evidence of the registered office of the company, e.g. business registration (where applicable).
   公司註冊辦事處地址證明，例如商業登記證（如適用）。 ☐
3. Certified copy of the company search enquiry of the company registry (same as the place of incorporation of the company), or certified certificate of incumbency or equivalent as issued by the company's registered agent, within the last six months.
   最近六個月內由當地（公司的註冊地點）相關註冊機構發出的查冊報告的核證副本；或由當地註冊代理於最近六個月內發出的職權證明書或同等證明的核證副本。 ☐
4. Certified authorised signatory list or extract from board minutes empowering a named person to open/operate an account.
   已經核證的授權簽署人名單或從董事會會議記錄中摘錄授權指定人士開立／操作帳戶。 ☐

5. Verification of identity of two directors of the company, one of whom must be an executive director and if different to these, we also need to verify the identity of those who have signed the application form – please complete part B and C of section M.
兩名董事的身份證明，而其中一名須為執董事；如簽署申請表人士並非上述董事，我們還需要核證其身份 – 請填妥M部份之B及C節。 ☐

6. Verification of identity of one signatory empowered to give instructions (if not one of the directors identified above) – please complete part B and C of section M.
一名有權提交指示的授權簽署人之身份證明（如果不是上述董事其中一人）– 請填妥M部份之B及C節。 ☐

7. Trading company – latest annual report and accounts. Non-trading company – evidence of the source of funds.
貿易公司 – 最新的年報及賬目。非貿易公司 – 資金來源證明。 ☐

8. Private limited company – Verification of the identity of all shareholders holding 25% (or 10% for high risk circumstances) or more of the issued share capital as at the date of the application. Where the shareholders are not individuals, or where there are any individuals (other than shareholder) who exercise ultimate control over the management of the company, we will require verification of the identity of the ultimate beneficial owner of those entities / individuals and their relationship to the company. – please complete part B and C of section M.
私營有限公司 – 所有於進行此申請時擁有25%或以上已發行股本的股東之身份證明（若屬高風險類別，則為擁有10%或以上）。若股東不是以個人身份擁有股權，或另有股東以外的人士對公司管理擁有最終控制權，我們將要求對該實體／個人的最終實益擁有人進行身份確認，並要求提供該等實體／個人與公司之間關係的證明 – 請填妥M部份之B及C節。 ☐

9. For corporate trustee application - Evidence of the appointment of trustees (for example a certified copy of an extract from the trust deed, but not the whole deed) if the application is in respect of an existing trust.
適用於企業受託人申請 - 如為現有信託，請提交委任受託人的證明（例如信託契約相關摘要的副本，而非整份信託契約的副本）。 ☐

10. For corporate trustee application - The trustees (settlor(s) where policies to be settled into trust) should provide the name, current residential address and date of birth or death for all the parties to the trust, for example settlor/donor, protector, beneficiaries. If the beneficiaries are not named you must provide the class of beneficiaries, for example grandchildren.
適用於企業受託人申請 - 受託人（若以信託形式結算則為委託人）應提供信託相關人士（例如委託人/捐贈人、保護人、受益人）的姓名、現時居住地址和出生日期／死亡日期。若受益人尚未有名稱，您必須提供受益人類別，例如孫子女。 ☐

Capacity (✓) 身份／職位	☐ Settlor/Donor 委託人／捐贈人	☐ Protector 保護人	☐ Beneficiary 受益人
Name 姓名			
Date of birth or death 出生／死亡日期	d d m m y y y y	☐ Birth 出生	☐ Death 死亡
Residential Address 居住地址			
	Postcode 郵區編號		

Capacity (✓) 身份／職位	☐ Settlor/Donor 委託人／捐贈人	☐ Protector 保護人	☐ Beneficiary 受益人
Name 姓名			
Date of birth or death 出生／死亡日期	d d m m y y y y	☐ Birth 出生	☐ Death 死亡
Residential Address 居住地址			
	Postcode 郵區編號		

Capacity (✓) 身份／職位	☐ Settlor/Donor 委託人／捐贈人	☐ Protector 保護人	☐ Beneficiary 受益人
Name 姓名			
Date of birth or death 出生／死亡日期	d d m m y y y y	☐ Birth 出生	☐ Death 死亡

Residential Address
居住地址

Postcode 郵區編號

Class of beneficiary if not named (an extract of the deed may be provided)

若受益人尚未有名稱，請提供受益人類別（可提供契約相關摘要）

You may also wish to provide identification documentation at the time of application/assignment for the named parties to the trust (for example, beneficiaries) in order to avoid delays on subsequent transactions where documentary evidence is required.

您可於提出申請／轉讓時提供信託各方的身份證明文件（例如：受益人），以避免日後因為需要提交書面證據而出現交易延誤。

If there are more relevant parties to the Corporate, please photocopy this page, attach the details with this application form and tick here (✓) ☐

如果尚有其他與企業相關人士，請複印本頁，將資料與本申請表格一同呈交，並在此加上剔號 (✓)

N FINANCIAL ADVISER/SUITABLE CERTIFIER DECLARATION 理財顧問／合適核證人聲明

▶ **This method of certification is required for Isle of Man regulatory purposes.**

▶ **此核證方法為馬恩島監管當局規定。**

PART 1 - HOW HAS THE CUSTOMER DUE DILIGENCE (CDD) BEEN OBTAINED
第 1 部分 – 如何獲得客戶盡職調查資料

This section must be completed in all instances by the Financial Adviser/Suitable Certifier.

理財顧問／合適核證人必須填寫本部分。

SECTION 1(A) - PROVISION OF CUSTOMER DUE DILIGENCE "CDD"
第 1(A) 部分 - 提供客戶盡職調查

To allow us to understand how the CDD provided has been obtained, please select one of the following:

在了解如何進行客戶盡職調查前，請選擇以下其中一項。

1 All elements of CDD provided were obtained by me directly from the customer. ☐
所有已提供客戶盡職調查的元素是我直接從客戶獲得。

2 Some elements of CDD provided were obtained by me directly from the customer. ☐
部分已提供客戶盡職調查的元素是我直接從客戶獲得。

3 None of the CDD provided was obtained by me directly from the customer. ☐
已提供客戶盡職調查的元素並非是我直接從客戶獲得。

If option 2 or option 3 have been selected, please complete Section 1(b).

如選項為2或3，請填寫第1(b)部分。

SECTION 1(B) – THIRD PARTIES PROVIDING CDD
第1(B)部分 – 第三方提供客戶盡職調查

Where some or all elements of CDD have been provided by third parties, please complete the following details explaining what those CDD items are and who provided them.

如果所有或部分客戶盡職調查的元素是由第三方提供，請填寫並詳細列明客戶盡職調查的文件及提供者。

CDD ITEM PROVIDED (E.G. DETAILS OF PASSPORT, BANK STATEMENT OR UTILITY BILL) 已提供客戶盡職調查的文件（如：護照詳情、銀行結算單或公用事業單）	FULL NAME OF THE THIRD PARTY PROVIDING THE CDD 提供客戶盡職調查的第三方全名	RELATIONSHIP OF THE THIRD PARTYTO THE CUSTOMER (E.G. SOLICITOR, ACCOUNTANT) 第三方與客戶的關係（例如：律師、會計師等）

Where third parties have been named above, please provide their full details in section 3 below.

上述已提及的第三方，請在第3部分提供其詳情。

SECTION 2(A) – CUSTOMER MEETINGS
第2(A) 部分 – 客戶會議

To allow us to understand who and by what means the customer has been met, please select one of the following options:

為了解那一方及從何渠道與客戶會面，請選擇以下其中一項。

1 I met the customer in person on d d m m y y y y ☐
我已親身與客戶會面，日期為

2 I met the customer face to face via live video stream on d d m m y y y y ☐
我已透過實時視頻串流與客戶會面，日期為

3 I have not met the customer but they have been met in person by a third party. ☐
我未有與客戶會面，但第三方已親身與客戶會面。

4 I have not met the customer but they have been met via live video stream by a third party. ☐
我未有與客戶會面，但第三方已透過實時視頻串流與客戶會面。

5 The customer has not been met by any party. ☐
任何人未曾與客戶會面。

If option 3, 4 or 5 have been selected, please complete Section 2(b).

如選項為3、4或5，請填寫第2(b)部分。

SECTION 2(B) – THIRD PARTIES WHO HAVE MET CUSTOMERS
第2(B) 部分 – 與客戶會面的第三方

Where a third party has met the customer, please provide the details of the third party and the circumstances of the meeting.

請提供與客戶會面的第三方詳情，及會議情況。

FULL NAME OF THE THIRD PARTY WHO MET THE CUSTOMER 與客戶會面的第三方全名	HOW THE THIRD PARTY MET THE CUSTOMER (I.E. IN PERSON OR VIA LIVE VIDEO STREAM) 第三方如何與客戶會面（即親身或透過實時視頻串流）	DATE THE THIRD PARTY MET THE CUSTOMER 第三方與客戶會面的日期	RELATIONSHIP OF THE THIRD PARTY TO THE CUSTOMER (E.G. SOLICITOR, ACCOUNTANT ETC.) 第三方與客戶的關係（例如：律師、會計師等）
		d d m m y y y y	
		d d m m y y y y	
		d d m m y y y y	

Where third parties have been named above, please provide their full details in section 3 below.

上述已提及的第三方，請在第3部分提供其詳情。

If option 5 in Section 2(a) has been selected, indicating the customer has not been met by any party, please provide an explanation in the box below why the customer has not been met.

如第2(a)部分選擇第5項，表示沒有人曾與客戶會面，請於下方提供未曾與客戶會面的原因。

SECTION 3 – DETAILS OF THIRD PARTIES
第3部分 – 第三方的詳情

Where third parties have been named in sections1(b) and/or 2(b), please provide their full details below so we may determine the individual's regulatory status.
在第1(b) 及／或2(b)部分已提及的第三方，請提供其詳情以協助我們決定其個人監管狀況。

Full Name of Individual
個人全名

Occupation
職業

Date of Birth
出生日期
d d m m y y y y

Residential Address
居住地址

Postcode 郵區編號 | Country 國家

Registered Company Name 註冊公司名稱	
Registered Company Address 註冊公司地址	
	Postcode 郵區編號 / Country 國家
Associated Professional Body 連繫的專業機構	
Professional Body Membership Reference 專業團體會員號碼	

If more than one third party has been named in section 1(b) and/or 2(b), please take a copy of Section 3 and complete the details of the additional third party.

如第1(b) 及／或2(b)部分提及多過一位第三方，請複印第3部分及填寫其他第三方的詳情。

How to certify documents is outlined in the document **Anti-Money Laundering and Document Certification Requirements**.

如何核證文件已載於反洗黑錢及文件核證要求。

SECTION 4 – FINANCIAL ADVISER DECLARATION 第4部分 – 理財顧問聲明

I declare that: 本人聲明：

- I have taken reasonable steps to ensure that the funding is legitimate and in line with the client's circumstances.
  本人已採取合理步驟確認該筆資金合法，並與保單持有人的情況相符。
- To the best of my knowledge, all the information provided with this form and application is true and complete and that I will provide further information if required.
  就本人所盡知及所盡信，本表格及由請所有資料均為真實及完整。本人亦確認會應要求進一步提供資料。
- I have not made any changes to the application form after the client has signed it
  本人並未對保單持有人簽署後的申請表格作任何修改。
- I have verified the contents of the original documents where copies have been enclosed and that they are true copies of the original.
  本人已核證所呈交文件副本的正本內容，並確認其為正本的真實副本。
- I have conducted the **Financial Needs Analysis** and **Risk Profile Questionnaire** with the client. The relevant documents together with the **Important Facts Statement** and **Applicant's Declarations** are enclosed.
  本人已跟保單持有人完成**財務需要分析**及**風險承擔能力問卷**，並隨附相關文件及**重要資料聲明書**及**申請人聲明書**。

By providing certification for Customer Due Diligence documents where these have been viewed and verified via secure live video stream, you confirm: 透過安全實時視頻串流，客戶盡職調查文件的證明已獲查閱及驗證，您確認：

- That the client held their ID beside their face to confirm the document as a true likeness.
  客戶將身份證明文件放在他們的臉旁，以確認該文件與客戶的真實肖像相似。
- The other elements of the Customer Due Diligence (CDD) were held up by the clients so I could verify they were a true likeness to those in my possession.
  客戶亦出示了其他客戶盡職調查(CDD)的文件，因此我可以驗證該文件與我所持有的為真實相似。

› That I obtained evidence by retaining a recording of the video meeting or by taking a picture of my client with their CDD for record keeping purposes and to validate my certification. I will provide this to Utmost International Isle of Man Limited upon request.
本人保留視頻會議的錄影或拍攝客戶盡職調查的照片以獲取證明文件，用作記錄保存和核實我的認證，我將按要求提供予Utmost International Isle of Man Limited。

I confirm that I gave advice concerning this investment to the applicant(s) in (name of country)
本人確認曾就此投資向申請者提供建議，地點為（國家名稱）

on 日期 | d | d | m | m | y | y | y | y |

Regulatory body authorisation number (if applicable)
監管機構登記號碼(如適用)

Regulator name
監管機構名稱

Utmost International Isle of Man Limited financial adviser account number
理財顧問編號

Financial adviser
理財顧問

SIGNATURE
簽署

Full name of financial adviser
理財顧問全名

Date
日期 | d | d | m | m | a | a | a | a |

Introducer firm stamp
中介人公司印鑑

EXECUTIVE INVESTMENT PLAN

utmost
WEALTH SOLUTIONS

Bank details and payment methods
(No funds can be remitted until the application is accepted)

全才投資相連計劃

銀行資料及付款方式
(在申請獲接納前不需匯出投資金額)

Please forward any cheque or copy of receipt of any electronic bank transfer payment to Utmost International Isle of Man Limited, Unit 2402C, Great Eagle Centre, 23 Harbour Road, Wanchai, Hong Kong.

請將支票或任何銀行電匯收據，交予 Utmost International Isle of Man Limited，地址為香港灣仔港灣道23號鷹君中心2402C室。

A CROSSED CHEQUE PAYMENT 劃線支票

Crossed cheques made payable to Utmost International Isle of Man Limited (account name is required to be printed on the crossed cheque).

劃線支票抬頭為「Utmost International Isle of Man Limited」(劃線支票須顯示帳戶名稱)。

B TELEGRAPHIC TRANSFER DETAILS 電匯詳情

Please send to the relevant currency account below, referencing your policy number. Please also provide the Telegraphic Transfer Confirmation showing your bank name, your name as bank account owner, your bank account number and the transfer details to Utmost International Isle of Man Limited. Please speak to your bank in the first instance whenever in doubt.

請電匯至以下相關貨幣戶口，並以您的保單編號作為電匯參考編號。請提供電匯確認資料，該資料應顯示銀行名稱、您的姓名以證明為該銀行戶口持有人、銀行戶口號碼及轉帳予Utmost International Isle of Man Limited的詳情。如有任何疑問，請先與銀行聯絡。

Beneficiary: 收款人: Utmost International Isle of Man Limited

Beneficiary address: 收款人地址: King Edward Bay House, King Edward Road, Onchan, Isle of Man IM99 1NU, British Isles

Other Currency Payments
以其他貨幣付款

Swift code: SWIFT編號: NWBKGB2LXXX

Bank: 銀行: National Westminster Bank

Bank address: 銀行地址: National Westminster Bank, 2 1/2 Devonshire Square, London, EC2M 4XB

(Select as applicable): (請選擇適用者):

		IBAN Number: IBAN號碼:	Account number: 戶口號碼:
1.	US dollar 美元	GB05NWBK60730167544800	140-00-67544800
2.	Euro 歐元	GB63NWBK60720267545858	550-01-67545858
3.	Australian dollar 澳元	GB18NWBK60730167535836	160-01-67535836
4.	Canadian dollar 加拿大元	GB80NWBK60730167521916	150-01-67521916
5.	Danish krone 丹麥克朗	GB22NWBK60730167545270	175-01-67545270
6.	Hong Kong dollar 港元	GB52NWBK60730167555691	338-01-67555691
7.	Japanese yen 日圓	GB40NWBK60730167538835	349-01-67538835
8.	New Zealand dollar 新西蘭元	GB26NWBK60730167576141	217-01-67576141
9.	Norwegian krone 挪威克朗	GB23NWBK60730167568823	222-01-67568823
10.	Singapore dollar 新加坡元	GB53NWBK60730167598838	409-01-67598838
11.	Swedish krona 瑞典克朗	GB69NWBK60730167554997	232-01-67554997
12.	Swiss franc 瑞士法朗	GB14NWBK60730167541534	234-01-67541534

GBP Payments 英鎊付款

Swift Code: SWIFT編號: RBOSIMD2XXX

Bank: 銀行: Isle of Man Bank, East Region

Bank Address: 銀行地址: East Region, Athol Street, Douglas, Isle of Man

		IBAN Number: IBAN號碼:	Account number: 戶口號碼:
13.	Sterling 英鎊	GB94NWBK55910010939946	440-00-10939946

IMPORTANT

- **Please make sure that the applicant's name and/or Policy number is/are quoted in the payment field, referred to by the bank as SWIFT field 70, on the electronic bank transfer form to ensure that correct details are sent to Utmost International Isle of Man Limited.**
- **Please note that when sending payments electronically by using IBAN numbers, spaces should be excluded. If payments are sent by using account numbers, please include the dashes in between the numbers.**
- **All bank charges, such as telegraphic transfer charges, are the responsibility of the applicant, not Utmost International Isle of Man Limited.**

重要資料

- 請將申請者姓名及／或保單號碼填寫銀行電匯表格支付欄（銀行稱為 *SWIFT-70*），以確定正確資料傳送至Utmost International Isle of Man Limited。
- 請注意，使用電子轉帳時，IBAN號碼不用留白。如使用戶口號碼，請連同戶口號碼內的破折號一同填上。
- 所有銀行費用，例如電匯費用，須由申請者支付而非Utmost International Isle of Man Limited。

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