FRENCH EXECUTIVE PORTFOLIO



WITHDRAWAL/CLOSURE FORM

All references to Utmost PanEurope in this form refer to Utmost PanEurope dac.

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.

THIS DOCUMENT WAS LAST UPDATED IN APRIL 2024.

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

HOW TO COMPLETE THIS FORM?

- > Use black or blue ink.
- > Use CAPITAL LETTERS only.
- Do not use correction fluid cross through any amendments (initialled by all policyholders)
- If you need to photocopy any pages to provide further details, please ensure all policyholders initial the pages
- > We recommend that you speak to your financial adviser before completing this form

Please note that withdrawals can only be requested 36 calendar days after the Contract start date.

NOTE

- > There may be charges associated with a full surrender which will be debited prior to payment.
- Any payment instruction that has already been submitted and is in progress will be processed first and no further payment or surrender instruction can be processed until the previous payment has completed.
- > Utmost International cannot be held liable for any delays if multiple payment instructions are received when existing payment instructions are pending completion.

A POLICY AND CONT	ACT DETAILS		MANDATORY
Policy number			
	nder which means the r		awal payment. These will apply to a num published amount, which can
Who should we contact in case of queries with this request?	Policyholder	Adviser	
Contact name		Email address	
Contact number		Alternate contact number	

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POLICYHOLDER DETAILS

MANDATORY

NOTE

If your details have changed, a payment verification call may be needed. We will use the phone number we hold on file for you in the first instance but may need an alternative number. Please provide this in the section below to help prevent any delays. If there are more than two policyholders, please copy this sheet with the details and attach with initials of all applicants.

1	Title (Mr, Mrs, Miss or Other)					
2	Gender	Male	Female	Male	 Female	
3	Surname					
4	Maiden name (if applicable)					Question 4 and 5 lf
5	Previous name or any aliases (if applicable)					not completed we will assume you have neve been known by anothe
6	Forenames (in full)					name.
7	Employment status (✔)	Employe	d	Employed	d	Question 8 Please include role e.g., Director and industry
		Retired /	Unemployed	Retired /	Unemployed	sector e.g., accountant If retired / unemployed please provide details
	Date of retirement / unemployment	d d m m	у у у у	d d m m	у у у у	of your previous occupation and includ date of retirement
8	Occupation					or unemployment in Question 7.
0	Emandagen					
9	Employer					
10	Employer Address					
			Postcode		Postcode	
11	Nationality / dual nationality					
4.0	(if applicable)					
12	! Date of birth	d d m m	у у у у	d d m m	у у у у	
13	Country of birth					
14	Permanent residential address (PO Boxes and					
	'care of' addresses are					
	not acceptable)					
			Postcode		Postcode	

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15 Please provide details of previous address since commencement of the bond.			If more than one previous address, please provide details on a separate sheet and attach securely to this
If this address is the same as your residential address, tick heree	Postcode	Postcode	form. Your personal code
16 Contact telephone number17 Email address			must be something memorable as it will be required when you first receive your login credentials. A personal code can be made up of a mixture of letters, numbers and
18 Would you like to be pro www.utmostinternation	ovided with login credentials to viewal.com?	w your policy online at	symbols with a minimum of 4 characters and a maximum of 13. Personal codes are case sensitive.
If 'Yes', provide a unique Personal Code 19 Country/Countries of Tax Residency	Yes No	Yes No	codes are case sensitive. Login credentials will only be sent (to your email address above) once your bond is in force and policy documentation sent.
20 National Insurance (NI) number			Only complete question 20 if you are a UK tax resident.
21 US Tax Identification Number (TIN)22 Other tax reference number(s)			Only complete question 21 if you are a US tax resident.
ADDITIONAL REQUI	REMENTS FOR POLITICA	LLY EXPOSED PERSONS	
could be classed as a Politi previously been, entrusted senior political or governm Corporation, or a board me considered a PEP in their o	cally Exposed Person (PEP). A PEP with prominent public functions of the sember of the sember of a Central Bank. Immediation wn right.	required to identify persons associated is a term used to describe someone where responsibilities. For example: a Head Judiciary or the Military, a senior emplote family members or close associates of	no is currently, or has of State, a holder of a yee of a State Owned of a PEP should be
	pelow of any persons that could be on confirms that there are no assoc	e considered a PEP (as defined above) i ciated PEPs:	n relation to this

Where any parties to the Bond are considered a PEP (as defined above), you will be required to complete and submit a Source of Wealth Questionnaire alongside this application. This questionnaire can be obtained via www.utmostinternational. com or by contacting our Customer Service team.

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С

PAYMENT OPTIONS - PART SURRENDER

MANDATORY

When you request a withdrawal and you have a tax mandate in place we will surrender sufficient units for you to receive the amount you have requested and pay the tax liability described in this note to your bank account. For example, if you request EUR5,000 we will surrender sufficient units to pay EUR5,000 plus the tax liability of 30% in the first eight years; and after eight years 24.7%. Where you do not have a tax mandate we would only deduct the amount requested i.e. EUR5,000 in this example.

SELECT THE METHOD FOR PART SURRENDER						
Part Surrender	Regular withdrawal					
Currency of payment	Currency of payment					
EUR GBP USD CHF SEK	EUR GBP USD CHF SEK					
Withdrawal value or Maximum* without incurring an early surrender charge *Maximum means the largest one off withdrawal without incurring an Early Surrender Charge available whilst maintaining a minimum balance, in line with the Policy Terms. Where requesting the maximum amount, please just insert the word "Maximum".	Value or Percentage of total premiums (per year) Quarterly Six monthly Yearly Start date: d d m m y y y y If your regular withdrawal start date has passed before we process this request, we will arrange a one off payment for the missed amount and start your regular payment from the next payment date.					

D FUNDING YOUR WITHDRAWAL

MANDATORY

If you have chosen the discretionary asset management - investment strategy, you do not need to complete this section as we will instruct the discretionary asset manager accordingly.

NOTE

- > You must specify which Asset to which the value of your Policy is linked to that you wish to sell to provide the value to pay your withdrawal.
- > For regular withdrawals, the Asset(s) to which the sale of your units are linked will become the nominated asset(s).

 The amount to be sold must be completed under the title '% of withdrawal'. If the withdrawal amount is larger then the value of the nominated asset(s) then the withdrawal will not be paid.
- > For one off withdrawals we will make payment to you when the proceeds from the sell have been credited to our bank account or, at the latest within a maximum period of two months following receipt of the part surrender request. For more information please refer to the Policy Terms.

FULL NAME OF ASSET INCLUDING CURRENCY	AS	ASSET IDENTIFIER (ISIN)								% OF WITHDRAWAL (TO TOTAL 100%)	OR	SELL ASSET IN FULL (PLEASE TICK)		

MANDATORY If you do not intend to fully surrender your bond, please move on to section F. Full Surrender (sell all assets) Payment currency EUR GBP USD CHF SEK If we are unable to sell any Assets as per your selection above, due to the Asset being illiquid we will contact you to provide you with further options. MANDATORY NOTE > Payments must benefit all policyholders on the bond equally by being paid to a joint bank account If not using a joint bank account, please specify the additional bank account details. Payments will be issued equally between accounts > Providing new bank details not previously paid to could cause delays as additional verification may be required Please select your preferred payment method: Telegraphic Transfer. Please be advised that payments incur a bank transfer charge. BACS direct credit. Only available for GBP payments paid to a UK, IOM or Channel Islands bank account. This payment method takes three working days to reach the account, but doesn't incur a bank transfer charge. If no payment method is selected we will default to Telegraphic Transfer, unless you have requested GBP regular withdrawal payments, in which case we will default to BACS where possible. BANK DETAILS Account name If more than two separate payees please Account number copy this section and attach securely to this form. Bank sort code When requesting **Building Society** withdrawals be paid to roll number an account other than (if applicable) the account the Premium is remitted from (as Bank BIC/Swift code detailed in section E), (required for all banks an original or suitably outside the UK) certified bank statement **IBAN** must be submitted to prove the alternative bank account is in the Name & address of bank client(s)' name. How long has the account

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Years

been held?

51	CMIET. I I I I I I I I I I I I I I I I I I I	
currency that is not locally uprovide the intermediary SN this information. Intermediary SWIFT code	y SWIFT code is required when making international payments in a used by the recipient bank. If this is in line with your request, please WIFT code for your bank. You may need to contact your bank to obtain	If you do not complete this section and the currency of your payment is not locally used by the recipient bank, we will need to contact you to request the intermediary SWIFT and this could delay the
Please tick here if you want	to proceed without the intermediary SWIFT code.	payment.
Please provide further bank	k details below (if applicable).	
Account name		If more than two
Account number		separate payees please copy this section and attach securely to this form.
Bank sort code		-
Building Society roll number (if applicable)		When requesting withdrawals be paid to an account other than the account the Premium is remitted from (as
Bank BIC/Swift code (required for all banks outside the UK) IBAN		detailed in section E), an original or suitably certified bank statement must be submitted to prove the alternative
Name & address of bank		bank account is in the client(s)' name.
currency that is not locally u	Years / SWIFT code is required when making international payments in a used by the recipient bank. If this is in line with your request, please WIFT code for your bank. You may need to contact your bank to obtain	If you do not complete this section and the currency of your payment is not locally used by the recipient bank, we will need to
Please tick here if you want	to proceed without the intermediary SWIFT code.	contact you to request the intermediary SWIFT and this could delay the payment.
Please provide further banl	k details below (if applicable).	
Account name		If more than two
Account number		separate payees please copy this section and attach securely to this form.
Bank sort code		iorni.
Building Society roll number (if applicable) Bank BIC/Swift code (required for all banks outside the UK) IBAN		When requesting withdrawals be paid to an account other than the account the Premium is remitted from (as detailed in section E), an original or suitably certified bank statement must be submitted to
		prove the alternative bank account is in the client(s)' name.

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Name & address of bank	
Pactors	da
How long has the account been held?	ue
Please note an intermediary SWIFT code is required when making intercurrency that is not locally used by the recipient bank. If this is in line we provide the intermediary SWIFT code for your bank. You may need to this information. Intermediary SWIFT code Please tick here if you want to proceed without the intermediary SWIFT	vith your request, please contact your bank to obtain If you do not complete this section and the currency of your payment is not locally used by the recipient bank, we will need to contact you to request the intermediary SWIFT
G REASONS FOR REQUEST	MANDATORY
1 Reason for the original investment?	For example: life assurance, wealth accumulation, inheritance planning, etc.
2 Reason for surrender / withdrawal?	
3 Did you seek financial advice on this surrender / withdrawal?	For example: fund performance, charges, change of circumstances, alternative investment, need access to funds for loan repayment, property investment, etc.
Yes No H. AUTHORITY OF POLICYHOLDER(S)	MANDATORY

The declaration below is made by each person authorising the withdrawal/closure. I hereby:

- 1. authorise and request Utmost PanEurope to carry out the transaction(s) detailed in either section C, D or E in accordance (where applicable) with the French Executive Portfolio Policy Terms.
- 2. other than any irrevocable beneficiary named in section B, confirm that there is no assignment or any person or company with a notice or interest in the Policy.
- 3. confirm that if there is a nominated beneficiary who is required to agree the withdrawal (i.e. an irrevocable one) they have signed this form.
- 4. confirm that there is no Bankruptcy Order against me or any beneficiary, nor am I or the beneficiary, an undischarged bankrupt or deemed to be insolvent under any relevant insolvency legislation.
- 5. undertake to indemnify Utmost PanEurope against any claims or demands made by any other person or party as a result of the payment(s) requested in section C, D or E.
- 6. agree that payment of the withdrawal or closure proceeds shall constitute full discharge of the liability of Utmost PanEurope.
- 7. confirm that by fully/partially encashing the policy, the policyholder(s) has/have sought and considered financial advice in regards to the potential tax consequences and referred to the French Executive Portfolio Policy Terms.
- 8. confirm that I am aware of the potential tax consequences of receiving the withdrawal or closure proceeds and I will declare these proceeds, if applicable, to the relevant tax authority in my country of residence.

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Utmost PanEurope does not offer legal, tax or financial advice and we can accept no responsibility for any action taken or refrained from being taken on the basis of information provided by us. Any information provided is based on our understanding of the current law and practice and is subject to change in the future.

NOTE

For your convenience, you can email your completed form to IOMpaymentsout@utmostgroup.com including your bond number in the subject. You can also send the completed form back to us by post or fax to the Administration Centre details provided in the footer at the end of this document.

SIGNATORIES - All policyholders, including irrevocable beneficiaries or pledgees where applicable, must sign below. Please also indicate the capacity in which you are acting and ensure this form is dated to avoid delays with your request.

	Signatures 1		Signatures 2	
SIGNED				
Full name				
Capacity (✔)	Individual	Irrevocable beneficiar	ry Pledgee	Other
Date	d d m m y y y	У	d d m m y y y y	
	Signatures 3		Signatures 4	
SIGNED				
Full name				
Capacity (✔)	Individual	Irrevocable beneficiar	ry Pledgee	Other
Date				

A WEALTH of difference

www.utmostinternational.com