

# DECLARATION OF LOSS OF PLAN SCHEDULE

Utmost Wealth Solutions is the brand name used by a number of Utmost companies. This item has been issued by Utmost PanEurope dac.

Complete this form using **blue or black ink** and **BLOCK CAPITALS**. If you make a mistake, cross it out, put in the correct words and sign your initials next to the correction. **Do not use correction fluid.**

## HOW WE USE YOUR INFORMATION

Our Privacy Statement explains when and why we collect personal information about our customers, how we use it, the conditions under which we may share it with others and how we keep it secure. It also explains how long we keep customer information for, how a customer can obtain details of the information we keep and the choices customers have about how we use that information. You can find a copy at [www.utmostinternational.com/privacy-statements](http://www.utmostinternational.com/privacy-statements) or you can request a copy from our Client Relations Team.

## WHAT TO DO WHEN YOU HAVE COMPLETED THIS FORM

Our preference is to receive documentation scanned and emailed. Please return the completed form(s) and supporting suitably certified documentation to [Info@UTMOST.ie](mailto:Info@UTMOST.ie).

If you are unable to send documentation electronically, it can be posted to Utmost PanEurope dac, Bishop's Square, Redmond's Hill, Dublin 2, Ireland.

## 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.

### A BOND DETAILS

Contract Type  
(tick one box only)

☐

Investment Bond

☐

Complete Investment Portfolio

☐

Guaranteed With Profit Bond

☐

International With Profit Investment Bond

☐

International With Profit Redemption Bond

☐

Inheritance Plan

☐

Universal Capital Account

☐

Flexible Investment Plan

☐

Portfolio Bond

☐

Dublin With Profit Redemption Bond

Plan Number

## A WEALTH *of* DIFFERENCE

[www.utmostinternational.com](http://www.utmostinternational.com)

Utmost PanEurope dac (registered number 311420) is regulated by the Central Bank of Ireland.

Registered Office address: Navan Business Park, Athlumney, Navan, Co. Meath, C15 CCW8, Ireland.

Utmost Wealth Solutions is registered in Ireland as a business name of Utmost PanEurope dac.

UIC PR 00158 | 02/24

## B

	Owner 1	Owner 2 (if any)
Title (Mr, Mrs, Miss or Other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames (in full)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Address (for correspondence)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>



	Owner 3 (if any)	Owner 4 (if any)
Title (Mr, Mrs, Miss or Other)		
Surname		
Forenames (in full)		
Address (for correspondence)		
Postcode		



## C

Name of Trust/Corporate Body										
Address (for correspondence)										
Postcode						—				

Please complete the details below for all of the Trustees / Authorised Signatories who are authorised to give instructions relating to this bond.

	<b>Trustee/Authorised Signatory 1</b>	<b>Trustee/ Authorised Signatory 2 (if any)</b>
Name		
	<b>Trustee/ Authorised Signatory 3 (if any)</b>	<b>Trustee/ Authorised Signatory 4 (if any)</b>
Name		



D

DECLARATION

- I declare that:
- › The Plan Schedule is lost
  - › I am the legal owner of the bond and I am legally entitled to the proceeds of the above bond
  - › The bond has not been assigned, pledged as security or given to any person who could have any claim upon it
  - › I will return the Plan Schedule to Utmost PanEurope dac if this is found
  - › I will indemnify Utmost PanEurope dac against any claim and any loss or expense which it may occur in consequence of the above not being true and/or payment of the proceeds being made without the Plan Schedule being returned to Utmost PanEurope dac.

SIGNATURE	Signature of Owner / Trustee / Authorised Signatory 1	Signature of Owner / Trustee / Authorised Signatory 2 (if any)
	<div></div>	<div></div>
Date	<div>d d m m y y y y</div>	<div>d d m m y y y y</div>
SIGNATURE	Signature of Owner / Trustee / Authorised Signatory 3 (if any)	Signature of Owner / Trustee / Authorised Signatory 4 (if any)
	<div></div>	<div></div>
Date	<div>d d m m y y y y</div>	<div>d d m m y y y y</div>

If there are additional owners / trustees / authorised signatories of the bond, please copy this page, complete the corresponding details for each additional owner / trustee / authorised signatory and attach the completed page to this Declaration of Loss of Plan Schedule.