

EXECUTIVE INVESTMENT ACCOUNT

APPLICATION FORM NEW BUSINESS AND TOP-UP

WARNING: PURSUANT TO SECTION 23(5) OF THE INSURANCE ACT 1966 OF SINGAPORE, AS MAY BE AMENDED FROM TIME TO TIME, IF YOU DO NOT FULLY AND FAITHFULLY DISCLOSE IN THIS APPLICATION FORM ALL FACTS WHICH YOU KNOW, OR OUGHT TO KNOW, THE POLICY ISSUED MAY BE VOID AND YOU MAY RECEIVE NOTHING FROM THE POLICY.

For the trustee of the QROPS, QNUPS, IPP or SIPP who have acceptable applicant status (accredited investor)

QROPS Trustee (✓)

QNUPS Trustee (✓)

IPP Trustee (✓)

SIPP Trustee (✓)

THIS DOCUMENT WAS LAST UPDATED IN JANUARY 2024.

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

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.

SECTION	PAGE	COMPLETED
A Type of application	3	<input type="checkbox"/>
B Details of the trust	4	<input type="checkbox"/>
C Details of the trustee applicant	4	<input type="checkbox"/>
D Beneficial Ownership	4	<input type="checkbox"/>
E Politically exposed person	5	<input type="checkbox"/>
F Details of the life assured	5	<input type="checkbox"/>
G Investment details	6	<input type="checkbox"/>
H Source of Funds - Bank details of where funds are being remitted from	6	<input type="checkbox"/>
I Investment choice	15	<input type="checkbox"/>
J Appointment of investment adviser representative	16	<input type="checkbox"/>
K Declaration And Application	20	<input type="checkbox"/>
L Verification of customer identity	25	<input type="checkbox"/>
M Financial crime - risk rating (This section is for completion by the financial adviser representative)	26	<input type="checkbox"/>
N Financial adviser representative declaration	26	<input type="checkbox"/>

ID NUMBERS

Utmost International
account number

(if reserved or if adding to an existing policy)

MAS representative
number

FINANCIAL ADVISER REPRESENTATIVE DETAILS

Name of financial adviser

Company name

Address

Telephone number

Fax number

E-mail address

Utmost International only accepts business introduced by companies which have Terms of Business with us.

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

All references to **Utmost International**, in this application form mean Utmost International Isle of Man Limited Singapore Branch.

TAXATION INFORMATION

Under Automatic Exchange of Information (AEOI) regulations Utmost International 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 **'Taxation information and self-certification - for entity investors'** or **'Tax declaration and self-certification for Trusts (where the trustees are all individuals)'** form. 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 promptly so we can determine if a new self-certification is required.

IMPORTANT INFORMATION FOR YOU - THE APPLICANT

Your application can be submitted online 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. This application form should be read together with the Confirmation of Charges, Product Summary, Customer Brochure, Your Guide to Life Insurance (This can be downloaded from Life Insurance Association's website: www.lia.org.sg) and the Policy Terms, which are available on request. Please note this application form is for use in Singapore only.

Before completing the application form, please make sure you receive and read through the relevant product information:

- › The Executive Investment Account product brochure.
- › The Executive Investment Account product summary.

ONLINE SERVICE ACCOUNT ON WEALTH INTERACTIVE

Where you have set up an Online Service Account, ongoing communication from us, such as policy valuations, will be carried out electronically through this account as much as possible, although there will be times when we do still need to correspond with you by letter.

If you would prefer to receive ongoing communication from us by post rather than online, please tick here (✓)

The underlying member may apply for a view only account. If this is required, please provide their email address and mobile telephone number here.

FREE LOOK PROVISION (APPLICABLE TO THE QROPS, QNUPS, IPP OR SIPP TRUSTEES)

You have the right to cancel your Executive Investment Account or additional investment and obtain a refund of any premium(s) paid, less any applicable charges* and any fall in the value of the assets linked to your Executive Investment Account. You have 30 days from the date that you receive the Schedule for the initial premium, or letter accepting the additional investment to let us know you want to cancel. Further information on how to cancel can be found in the Executive Investment Account Terms & Conditions.

* Where relevant, applicable charges include non-refundable fund charges, fees we have paid to your financial adviser representative on your behalf and bank charges.

COMPLETING THE FORM

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.

Please ensure that you complete all relevant sections. We will contact you regarding any missing information which will need to be provided in writing, and this may delay your application.

A TYPE OF APPLICATION

If this is an application for an **ADDITIONAL INVESTMENT**, please provide your existing Policy number: (you can find this in your policy documentation)

New Executive Investment Account (✓)

CHARGES

Please enter the reference code for your chosen charging structure which you confirm you have received and read in full. (Your financial adviser representative will be able to provide you with this code.)

Ongoing Service Charge

 . %

The Premium Allocation Percentage for this policy.

 . %

ACCOUNT CURRENCY

We wish our Policy to be valued in (✓)

SG\$

US\$

€

£

Other currency

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

Reason for investment
(e.g. saving for retirement)

B DETAILS OF THE TRUST

The trust name is	<input type="text"/>								
The trust was created on	<table><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		
Trust details	<div><p>The trust has been established as part of a scheme to provide a pension in retirement.</p><p>Source of assets supplied by the trustees: QROPS/IPP/SIPP – pension transfers or additional contributions to the QROPS/IPP/SIPP; or QNUPS – The trust assets will be a lump sum contribution to the QNUPS.</p></div>								
▶ The reason for the establishment of the trust, the type of trust and the source of the trust assets and country of origin.									
Trust assets	<input type="text"/>								

C DETAILS OF THE TRUSTEE APPLICANT

Corporate trustee name	<input type="text"/>	
Contact person	<input type="text"/>	
Country of registration	<input type="text"/>	
Addresses (This information must be provided in full. We are unable to accept PO Boxes and 'Care of' for Registered Office addresses)	Registered office address	Correspondence address
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
	<input type="text"/>	<input type="text"/>
Telephone number including area code	<input type="text"/>	<input type="text"/>
E-mail address	<input type="text"/>	<input type="text"/>
Corporate website address	<input type="text"/>	<input type="text"/>

D BENEFICIAL OWNERSHIP

A "Beneficial Owner" as defined in MAS Notice 314, on Prevention of Money Laundering and Countering the Financing of Terrorism - Life Insurers, means the natural person who ultimately owns or controls the customer or the natural person on whose behalf business relations are established, and includes any person who exercises ultimate effective control over a legal person or legal arrangement.

Are you the ultimate beneficial owner of the Policy (✓) Yes No

If "No", please provide details of the beneficial owner(s) below and provide valid proof of identity for each beneficial owner.

Please note that the following is NOT a nomination of beneficiary(ies) under the Policy.

Name (as shown in NRIC/ Passport/ FIN)	<input type="text"/>								
NRIC/Passport/ FIN No.	<input type="text"/>								
Date of birth	<table><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		
Relationship to the Policyholder	<input type="text"/>								

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Gender (M/F)	<input type="text"/>
Residency status (Singaporean/Singapore PR/ Pass holder/Other)	<input type="text"/>
Nationality (if not Singaporean)	<input type="text"/>

If there are two or more beneficial owners photocopy relevant pages and attach securely to this form.

E POLITICALLY EXPOSED PERSON

If the applicant(s), or any other party connected to this application either now or in the past/future, could be classed as a politically exposed person (PEP), or connected with a PEP, please provide details.

A politically exposed person is someone holding an important public position, or a person clearly related to them. Examples of these are: judicial or military officials, senior politicians, senior executives of publicly owned corporations, senior Government officials and Important political officials.

<input type="text"/>	<input type="text"/>
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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 will require Source of Wealth information which can be provided using the Source of Wealth Questionnaire, and may also require Source of Wealth evidence.

AUTHORISED SIGNATORIES

Please confirm the minimum number of authorised signatories of the corporate trustee needed to give instructions

F DETAILS OF THE LIFE ASSURED

	First Life Assured (member)	Second Life Assured (if any)
Title (✓)	Mr Mrs Miss Other <input type="text"/>	Mr Mrs Miss Other <input type="text"/>
Full forename(s)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Maiden name, previous name or alias	<input type="text"/>	<input type="text"/>
Sex (✓)	Male Female	Male Female
Date of birth	<input type="text"/>	<input type="text"/>
The maximum age for a life assured is 89.		
Nationality	<input type="text"/>	<input type="text"/>
Dual Nationality (If applicable)	<input type="text"/>	<input type="text"/>
NRIC number or equivalent ie employment ID, dependants' ID. Singapore residents only (if applicable)	<input type="text"/>	<input type="text"/>

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Relationship to Trustee Applicant
Residential address (c/o and PO Box address is not acceptable)

Pension Scheme Member

Pension Scheme Member

G INVESTMENT DETAILS

PREMIUM PAYMENT

Currency (✓) SG\$ US\$ € £ Other currency

Amount to be invested (anticipated total amount based upon estimated transfer value(s) or additional premium to be paid)

(Minimum premium SG\$150,000/US\$75,000/€75,000/£50,000 or currency equivalent of £50,000)

Payment method (✓) Electronic bank transfer Share transfer

► The minimum initial investment amount is £50,000 (or currency equivalent) and the minimum additional investment is £5,000 (or currency equivalent).

Number of Policies - new contracts only

Please enter the number of Policies you would like: (If not stated, the default number of policies is 1.)

<input type="text"/>	<input type="text"/>	<input type="text"/>
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The number of policies cannot be changed after the account is set up.

H SOURCE OF FUNDS - BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM

► The premium payment must come from an account held in the name of the trust.

ACCOUNT NAME	SHORT NAME	CURRENCY	SORT CODE**	SWIFT CODE***	ACCOUNT NUMBER	IBAN NUMBER*

Bank name

Bank address

Country

When was the account opened?

* IBAN stands for international bank account number and is always used in conjunction with a bank identifier code (BIC).

** 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.

ACTIVITY WHICH GENERATED AMOUNT TO BE INVESTED

Utmost International is required to record details of how the funds being invested have been accumulated.
Where funds come from more than one source you should complete all relevant sections to give us the full picture of its origin.

(✓)	DESCRIPTION	DETAILS REQUIRED	DETAILS
	Transfer of pension	Pension providers name	<input type="text"/>
		Pension account number	<input type="text"/>
		Pension providers address	<input type="text"/> <input type="text"/> <input type="text"/>
			Postcode
		Pension value	Currency <input type="text"/> Amount <input type="text"/>
		Transfer date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
		Transfer of pension	Pension providers name
	Pension account number		<input type="text"/>
	Pension providers address		<input type="text"/> <input type="text"/> <input type="text"/>
			Postcode
	Pension value		Currency <input type="text"/> Amount <input type="text"/>
	Transfer date		<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
	Transfer of pension		Pension providers name
		Pension account number	<input type="text"/>
		Pension providers address	<input type="text"/> <input type="text"/> <input type="text"/>
			Postcode
		Pension value	Currency <input type="text"/> Amount <input type="text"/>
		Transfer date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>

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Transfer of pension

Pension providers name	<input type="text"/>
Pension account number	<input type="text"/>
Pension providers address	<input type="text"/>
	<input type="text"/>
	Postcode <input type="text"/>
Pension value	Currency <input type="text"/>
	Amount <input type="text"/>
Transfer date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>

Transfer of pension

Pension providers name	<input type="text"/>
Pension account number	<input type="text"/>
Pension providers address	<input type="text"/>
	<input type="text"/>
	Postcode <input type="text"/>
Pension value	Currency <input type="text"/>
	Amount <input type="text"/>
Transfer date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>

Other

Description of the activity that generated the funds	<input type="text"/>
Role in relation to above activities	<input type="text"/>
Period over which the activities occurred	<input type="text"/>
Country in which the activity occurred	<input type="text"/>
Date received	<input type="text" value=""/> <input type="text" value=""/> years <input type="text" value=""/> <input type="text" value=""/> months
Proceeds received from the activity	Currency <input type="text"/> Amount <input type="text"/>

We may require further information or documentary evidence in addition to the documents already requested to support your application, in relation to your investment, before we can process the application. Your Financial Adviser can establish if further information or documentary evidence is needed by referring to our Source of Funds and Source of Wealth Guidelines or contacting us before sending in your application form.

Please enter what documentary evidence you are enclosing with this application form (if applicable).

b. Compensation

Name of organisation or individual that paid compensation	<input type="text"/>								
Reason for compensation	<input type="text"/>								
Country compensation was awarded	<input type="text"/>								
Total amount received	Currency <input type="text"/> Amount <input type="text"/>								
Date of received	<table border="1"><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		

c. Competition win

Name of competition organiser	<input type="text"/>								
Description of competition	<input type="text"/>								
Country competition was held in	<input type="text"/>								
Total amount won	Currency <input type="text"/> Amount <input type="text"/>								
Date of win	<table border="1"><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- › Letter on company headed paper or court order from compensating body validating the information in the application form; **or**,
- › Signed letter on company headed paper from solicitor/ lawyer handling the

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- › A signed letter from the organisation providing the proceeds of the win on letter-headed paper confirming name of winner, date of win and value of winnings; **or**
- › Bank statement showing deposit of winnings in clients name and referencing the organisation providing the proceeds of the win; **or**
- › Media coverage of the win showing name of winner, date of win and value of winnings

d. Gift

Full name of person who gave the gift	<input type="text"/>
Date of birth	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Nationality	<input type="text"/>
Address	<input type="text"/> <input type="text"/> <input type="text" value="Postcode"/>
Relationship to applicant	<input type="text"/>
Reason for gift	<input type="text"/>
Description of gift	<input type="text"/> <input type="text"/>
Total amount received	Currency <input type="text"/> Amount <input type="text"/>
Date received	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copies of **all** of the following:

- › A valid identification documentation for the donor (even if it is not coming from their account); **and**
- › Letter from the donor explaining the reason for the gift and source of funds behind the gift; **and**
- › Documentary evidence as to the donor's source of wealth as set out in the Source of Funds and Source of Wealth Guidelines

e. Inheritance

Deceased's full name	<input type="text"/>
Relationship to applicant	<input type="text"/>
Date of death	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)	<input type="text"/> <input type="text"/>
Amount received	Currency <input type="text"/> Amount <input type="text"/>
Date received	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Solicitor/lawyer's (who dealt with the estate) name	<input type="text"/>
Solicitor/lawyer's firm name	<input type="text"/>
Solicitor/lawyer's firm address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text" value="Postcode"/>

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- › Grant of probate (with a copy of the will) which must include the value of the estate; **or**
- › The will relating to the inheritance; **or**
- › A signed letter from the regulated solicitor dealing with the estate on letter-headed paper confirming the information supplied in this application

f. Loan

Name of loan provider

--

Address of loan provider

Postcode

Total amount borrowed

--	--

Date of loan

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy
of **one** of the following:

- › A signed letter from the lender on letter-headed paper confirming the name of borrower, amount of loan and date of draw-down; or,
- › A loan statement confirming the details provided in this form

g. Maturing policy/policy claim/replacement policy

If the source of funds is the sale of an investment rather than maturity, please complete h instead.

Name of policy provider

Address of policy provider

Postcode

Policyholder's full name

Length of time policy held

--	--

years

--	--

months

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.

Reason for policy claim or replacement policy (if applicable)

Total amount received

11

Surrender penalty
(if applicable)

Date received

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified
copy of **one** of the following:

- › Letter on company headed paper from previous product provider regarding notification of proceeds of claim under the policy; **or**
- › Closing statement from previous product provider

h. Sale of asset portfolio or investment

If the source of funds is a maturing investment rather than one that you are choosing to sell, please complete g instead.

Description of asset portfolio or investment (i.e. government bonds, equities etc.)	<input type="text"/>
Name of the company that held it	<input type="text"/>
Registered address of company	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Account name	<input type="text"/>
Length of time asset portfolio or investment held	<input type="text"/> <input type="text"/> years <input type="text"/> <input type="text"/> months

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of one of the following:

- › Legal sale document; or
- › Copy of contract note

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.

Date of sale	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Net amount received	Currency <input type="text"/> Amount <input type="text"/>

i. Sale of interest in company

Company name	<input type="text"/>
Business sector	<input type="text"/>
Address of company	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Your connection with the company For example: owner, partner or shareholder	<input type="text"/>
Date of sale	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Sale amount	Currency <input type="text"/> Amount <input type="text"/>
Net amount received The amount you have received after any deductions such as fees and taxes.	Currency <input type="text"/> Amount <input type="text"/>

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- › Signed letter on company headed paper from solicitor/ lawyer validating the information confirmed in this section of the application form; **or**,
- › Signed letter on company headed paper from regulated accountant validating the information in this section of the application form; **or**,
- › Copy of contract of sale and bank statement in the name of the client showing payment of the proceeds into an account in the name of the applicant; **or**,
- › Copies of media coverage of the sale (if applicable) as supporting evidence that the information is in this section of this application form

j. Sale of property

If you are not the beneficial owner of this property, please select a different option for source of funds that is more appropriate

Address of property sold
(including postcode if applicable)

Postcode

Length of time property owned years months

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 this.

Date of sale

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Total sale amount

Currency Amount

Net amount applicant received from sale

Currency Amount

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- › Signed letter on headed paper from solicitor; or lawyer handling the sale or from regulated accountant; **or**
- › Signed letter on headed paper from estate agent (if applicable); **or**
- › Copy of contract of sale detailing the details included in the application form

k. Other

Description of the activity that generated the funds

Role in relation to above activities

Period over which the activities occurred

Country in which the activity occurred

Date received

years months

Proceeds received from the activity

Currency Amount

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- › Appropriate, independent supporting documentation which validates the information provided in this section of the application form; **or**,
- › Signed letter from a person with personal knowledge of the activities described and in a position subject to anti-money laundering regulation, for example a regulated accountant or lawyer

I INVESTMENT CHOICE

Please use this section to list how your premium should be invested.

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

MANAGING YOUR INVESTMENTS (NEW CONTRACTS ONLY)

Would you like someone else to manage your investments? Yes No

INVESTMENT CHOICE

A minimum of US\$7,500/SG\$15,000/£5,000/€7,500 or currency equivalent of £5,000 (or as set by the respective fund managers) must be in any one asset.

SECURITY IDENTIFIER SEDOL/ISIN (IF KNOWN)	SECURITY/FUND NAME - PLEASE ENTER NAMES IN FULL.	ACCUMULATION/ INCOME UNIT REQUIREMENT (IF APPLICABLE)	SHARE CLASS (IF APPLICABLE, FOR EXAMPLE A, B OR C)	BASE CURRENCY OF SECURITY/ FUND (E.G., GBP, USD)	INVESTMENT % (WHOLE% NUMBERS ONLY)
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
					%
Total					1 0 0

INVESTMENT RESTRICTIONS

All assets required shall either be quoted on a stock exchange recognised by Utmost International Isle of Man Limited Singapore Branch or be specifically agreed by Utmost International Isle of Man Limited Singapore Branch as eligible to be purchased for the Portfolio Fund.

- › Utmost International unit-linked funds are not available.
- › No tangible commodity (eg diamonds or gold coins) or futures may be requested.
- › Requests for assets which Utmost International Isle of Man Limited Singapore Branch considers are not permitted as assets for a life assurance fund will not be accepted.
- › Any assets purchased in respect of your Portfolio Fund will be purchased at the open market buying price as shown on the contract note used by the vendor or stockbroker.
- › All assets are held in the name of Utmost International Isle of Man Limited Singapore Branch and all dealing and contract notes must be made and rendered in the name of Utmost International Isle of Man Limited Singapore Branch.

EXECUTIVE INVESTMENT ACCOUNT
APPLICATION FORM NEW BUSINESS AND TOP-UP

In the absence of complete investment instructions, or if a selected asset is not available, Utmost International Isle of Man Limited Singapore Branch will hold part or all of the premium in the Transaction Account which forms part of the Portfolio Fund.

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

Contact name	<input type="text"/>		
Telephone number (daytime)	<input type="text"/>	Fax number	<input type="text"/>
Telephone number (evening)	<input type="text"/>	E-mail address	<input type="text"/>

J APPOINTMENT OF INVESTMENT ADVISER REPRESENTATIVE

1 CLIENT AGREEMENT - TO BE COMPLETED BY THE TRUSTEE APPLICANT(S)

Account type	Executive Investment Account
Account number (to be completed by Utmost International)	<input type="text"/>

INVESTMENT ADVISER REPRESENTATIVE DETAILS

Name of firm	<input type="text"/>
Contact name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Country	<input type="text"/>

APPOINTMENT OF INVESTMENT ADVISER REPRESENTATIVE

This Policy allows investment into various types of assets including assets which are only suitable for Professional Investors. If you choose to invest in this Policy, you should ensure that you accept the level of risk associated with non-retail including the risk that the investment into such an asset:

- a. could provide a lesser degree of investor protection and regulatory safeguards; and
- b. could result in a loss of significant proportion of some or all of the sums invested; and
- c. may have a minimum duration, impose significant redemption penalties or are illiquid.

If you do not accept the level of risk associated with these assets, you should inform your Investment Adviser Representative not to invest in assets which are only suitable for Professional Investors. Utmost International will not restrict the choice of assets available under your Policy.

1. We confirm that we as the policyholder are legally entitled to effect any of the policy options contained in the policy terms.

Basis on which this authority is given (✓) (tick one option only)

2. We appoint and authorise the Investment Adviser Representative to act in the following capacity. Where we have selected:

Option 1 - Investment Adviser Representative authority

We understand the Investment Adviser Representative will discuss any proposed alterations to the investment composition of the policy with us and that they must have our written agreement before any changes are made to the policy.

Option 2 - Discretionary Investment Adviser Representative authority

We understand that the Investment Adviser Representative has complete discretionary authority, without consulting us, to make all investment decisions, to buy or sell assets, hold cash or other investments. We authorise Utmost International to act upon the investment instructions of the Investment Adviser Representative.

3. We appoint the Investment Adviser Representative detailed above to act on our behalf in respect of our policy on the basis specified in point (2) above. We understand that the Investment Adviser Representative is not acting on behalf of Utmost International.
4. We understand that Utmost International may need to:
- verify the identity of the Investment Adviser Representative;
 - verify that the Investment Adviser Representative is regulated by any appropriate regulatory authority; and
 - check that they have any qualifications required by law or by regulation for the activity to be carried out.
5. We acknowledge and agree that such confirmation is to enable Utmost International to comply with its regulatory duties as an authorised insurer in Singapore. We understand that this is not, and should not be construed as, any endorsement of an Investment Adviser Representative by Utmost International and that Utmost International does not warrant the Investment Adviser Representative's suitability or regulatory credentials.
6. We agree that Utmost International is not responsible for any loss or liability to our policy arising from this appointment.
7. We confirm that we take full responsibility for the acts or omissions of the Investment Adviser Representative, including any loss in the policy as a result of their acts or omissions (including, but without limitation, failure on the part of the Investment Adviser Representative to produce a reasonable investment return in relation to the policy).
8. Further, We for ourselves and our estate(s) indemnify Utmost International against all claims, demands and actions against Utmost International relating to any such loss suffered. This includes all costs and expenses arising from or in respect of the activities and performance of the Investment Adviser Representative (including, but without limitation, the cost of defending in any court of law any such claim demand or action against Utmost International).
9. If Utmost International becomes aware that an Investment Adviser Representative:
- has been refused membership by, or has been expelled from, a professional organisation; or
 - is under investigation by or has been the subject of disciplinary action by a regulatory authority; or
 - has or is carrying out activities in a manner which could prejudice or be harmful to its reputation; then
- Utmost International reserves the right to cease to act on the instructions of the Investment Adviser Representative with immediate effect and Utmost International will advise us of the fact.

10. Where we have chosen 'Investment Adviser Representative authority' Option 1:

- We understand that all decisions in relation to the investment strategy and alterations to the investment composition of our policy remain our sole responsibility.
- We have agreed with the Investment Adviser Representative that they must:
 - discuss any proposed alterations to the investment composition of the policy with us; and
 - have our prior written agreement before any changes are made;
- The date instructions are received will be in accordance with the policy terms.
 - If Utmost International receives more than one instruction on a given day they will be processed in the order in which they are received.
 - Once the instruction has been received it is irrevocable.
- We agree to notify Utmost International in writing of any changes which affect the appointment or authority of the Investment Adviser Representative. We understand that Utmost International will continue to accept our instructions which are sent by the Investment Adviser Representative unless we advise Utmost International of a change in the Investment Adviser Representative's appointment and authority.

- e. We understand that we can terminate the appointment of the Investment Adviser Representative by giving notice in writing to both the Investment Adviser Representative and Utmost International at their Branch Office of the termination of this appointment. The termination will not affect any transactions already carried out or for which binding instructions have been given, directly or indirectly.

11. Where we have chosen 'Discretionary Investment Adviser Representative authority' Option 2:

- a. We understand that the Investment Adviser Representative has complete discretionary authority, without consulting us, to make all investment decisions to buy or sell assets, hold cash or other investments. We authorise the Investment Adviser Representative to exercise on our behalf any of the options available under the policy terms applicable to our Policy relating to the investment allocations and/or investment conversion.
- b. We confirm that we have delegated all investment decision making to the Investment Adviser Representative.
- c. We understand that Utmost International will act exclusively on an authority once granted until we advise Utmost International in writing at its Branch Office of the termination of this appointment. The termination will not affect any transactions already carried out or for which binding instructions have been given, directly or indirectly.

12. Investment Adviser Representative fee

- a. We agree to pay the Investment Adviser Representative fee specified here:

Payment will be based on the value of the portfolio fund at the last Quarterly Date.

% a year or

set amount of £ a year

- b. We have agreed to the Investment Adviser Representative fee at the rates specified in this Application. We authorise Utmost International to withdraw an amount from our policy which will be paid quarterly at each Quarterly Date and paid directly to our Investment Adviser Representative.
- c. We understand that the Investment Adviser Representative fee will be treated as a withdrawal from our policy.

Signature of Trustee applicant(s) (If two applicants, both must sign. If there are more than two applicants, please continue on a separate sheet.)

SIGNATURE

First or sole Trustee applicant

Second Trustee applicant (if any)

Full name

Date

d	d	m	m	y	y	y	y
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d	d	m	m	y	y	y	y
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2 ACCEPTANCE OF APPOINTMENT - TO BE COMPLETED BY THE INVESTMENT ADVISER REPRESENTATIVE

Payment details for investment adviser representative fees

Payments will be made in the currency and to the bank account already held on our records.

13. Basis on which this authority is given:

- a. I confirm I hold the relevant authority necessary under the regulations applicable to the Monetary Authority of Singapore (MAS) to act in accordance with my appointment as Investment Adviser Representative.
- b. I confirm I will remain authorised to transact this type of business whilst I am acting as the Investment Adviser Representative to this portfolio fund. I also confirm I will notify you of any changes to my authorisation.
- c. I understand that some of the Utmost International products allow investment into assets which are only suitable for Professional Investors. If the Policyholder informs me that they do not want me to invest into assets which are only suitable for Professional Investors then I will not choose these assets to link to their Policy.

14. Please complete the appropriate section below:

Investment Adviser Representative authority (applicant has selected option 1).

I confirm that I hold the appropriate authorisation from the Monetary Authority of Singapore to provide ongoing investment advice to the policyholder(s).

I understand that Utmost International can act upon investment instructions that have been given by the policyholder(s) or the Investment Adviser Representative.

I understand that I must obtain a written agreement of the policyholder(s) to any investment advice given and that I may be asked to provide evidence of such to Utmost International, if requested.

MAS licence number

Discretionary Investment Adviser Representative authority (applicant has selected option 2).

I confirm that I hold a Capital Markets Services (CMS) licence that allows me to provide investment instructions on behalf of the policyholder(s) to Utmost International.

I, the authorised Investment Adviser Representative, confirm and agree that:

- › There is an agreement in place ('Terms of Business') that allows the Investment Adviser Representative to make any investment decisions about the portfolio fund.
- › The Investment Adviser Representative firm is fully responsible to the policyholder(s) for investment decisions, made by the Investment Adviser Representative, on the policy. The investment decisions and the investment choice must comply with the types of investment permitted in the policy terms and the product summary.
- › The policyholder(s) has the right to claim directly against the Investment Adviser Representative firm in relation to any act or omissions of the Investment Adviser Representative.

Capital Markets Services licence number

Telephone number

E-mail address

I have read the Conditions listed in this form and agree to act in accordance with them. I confirm I will notify you of any changes to my/our authority.

SIGNATURE

**Authorised representative of investment
Adviser Representative firm**

Full name of signatory

Position

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

► **The Investment Adviser Representative must be the financial adviser representative.**

► **Please provide us with an authorised signatory list for your company showing all individuals authorised to place instructions with us on behalf of your company. In the absence of a signatory list we will assume the only authorised individual is the signatory on this form.**

K DECLARATION AND APPLICATION

DATA PRIVACY STATEMENT

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 (Utmost International) 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 would apply.

I may ask Utmost International 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 processing my data but understand that this may have consequences in Utmost International being able to continue servicing my policy.

I have been made aware that a full explanation of how Utmost International 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 PanEurope dac: The Data Protection Officer, Utmost PanEurope dac, Navan Business Park, Athlumney, Co Meath, C15 CCW8, Ireland.

Or email: dataprotection@utmost.ie

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@Utmostinternational.com

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

For Utmost PanEurope dac: The Ireland Data Protection Commissioner, Canal House, Station Road, Portllington, R32 AP23 Co. Laois, Ireland.

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 either in this application or within accompanying documentation.

WARNING

Please read the following declaration carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Executive Investment Account. 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 Utmost International Isle of Man Limited Singapore Branch can assess its possible significance. If you become aware of such a fact while Utmost International Isle of Man Limited Singapore Branch is considering your application, you should notify Utmost International Isle of Man Limited Singapore Branch immediately. You should satisfy yourself under any taxation, exchange control or insurance law to which you may be subject that you are able to effect the proposed contract. You are responsible for any tax reporting and liability in relation to your Policy required by the relevant tax authorities. Your country of residence could vary how your Policy is taxed, and you should seek professional tax advice before moving to a new country.

DECLARATION - BY THE TRUSTEE APPLICANT

A copy of this completed Application Form is available on request. A copy of the Policy Terms and Conditions for your application are contained on the Utmost International website. www.utmostinternational.com

This Application Form must be completed by the Trustee applicant unless the financial adviser representative was requested to complete it. We confirm that our financial adviser representative is authorised to complete this application on our behalf and that our financial adviser representative can act on our behalf in accordance with the Policy Terms.

We have requested our financial adviser representative to complete this application on my behalf (✓)	First applicant	Yes	Second applicant	Yes
		No		No

Please state the country in which you signed this application.

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1. We understand that Utmost International has designated this Policy as suitable only for Professional Investors as defined by Utmost International in the Policy terms.
2. We confirm that we meet the definition of a Professional Investor. We understand that Utmost International do not have any details of our circumstances or characteristics, will not undertake any investigations as to whether we meet this definition, and will rely solely on our confirmation, as part of their application acceptance criteria, that we meet the definition of a Professional Investor.
3. We understand that the Policy allows investment into various types of assets and some these assets are only suitable for Professional Investors. We accept the level of risk associated with these assets including the risk that the investment into such an asset:
 - a. could provide a lesser degree of investor protection and regulatory safeguards; and
 - b. could result in a loss of significant proportion of some or all of the sums invested; and
 - c. may have a minimum duration, impose significant redemption penalties or are illiquid.
4. We understand that we should read the offering documents for assets suitable for Professional Investors.
5. We understand that if we consider ourselves to be Retail Investors in the future, Utmost International will not restrict the choice of assets available under the Policy. We also understand that it will be our responsibility to:
 - a. only choose assets which are suitable for Retail Investors; or
 - b. to inform the Investment Adviser Representative that we are now Retail Investors.
6. We understand that we will have an Online Service Account and agree that:
 - a. all Policy Transactions will be made by us using our Online Service Account where the Online Service allows, unless we have requested otherwise; and
 - b. all communications from us will be through our Online Service Account where the Online Service Account allows, unless we have requested otherwise.
7. We understand and agree that if this is a new contract we are applying to enter with Utmost International Isle of Man Limited Singapore Branch, it will be subject to Singapore law and the Policy Terms will be in the English language.
8.
 - a. If a Policy number is not shown in section A of this form, we request that the amount shown in section E be invested as an initial premium for policies comprising an Utmost International Executive Investment Account, and request Utmost International to issue the policies in the name of the trust; or
 - b. We request that the amount in section E be invested as additional premiums 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 or more digits.
9. We declare to the best of our knowledge and belief that the statements made in this application, and any related documents, are true and complete and we have not concealed a material fact. We agree to provide Utmost International Isle of Man Limited Singapore Branch with any further information in respect of the application, on request.
10. We confirm that Utmost International Isle of Man Limited Singapore Branch has not provided any investment advice and the member, or the Investment Adviser Representative are responsible for the selection of assets to be linked to the Portfolio Fund. We acknowledge that Utmost International Isle of Man Limited Singapore Branch is not responsible for any loss suffered or reduction in the value of the Policy arising from our investment. Utmost International Isle of Man Limited Singapore Branch does not have any responsibility for the management of the underlying assets and does not recommend any asset as a suitable investment.

11. We confirm that each life assured (or parent where parental consent is required) consents to this application, an insurable interest exists and the life assured agrees to our acting as their Trustee for the purpose of the information provided in this application.
12. We confirm that the Trustees are not incorporated, established, or operating in Hong Kong or the United States of America, or any of its territories. If the Trustees become incorporated, established, or operate in the United States of America, or any of its territories, we understand that Utmost International may not be able to accept any further premiums until after the Trustees cease to be incorporated, established, or operate in the United States of America, or any of its territories.
13. We understand that this application can only be accepted by employees of Utmost International Isle of Man Limited Singapore Branch's office situated at 6 Battery Road #16-02, Singapore 049909 and that no other employees or third parties have the necessary authority to create a binding contract.
14. We confirm that the premium for this Policy has not been sourced from our Central Provident Fund (CPF) account.
15. We confirm that the investment into the Executive Investment Account is within the investment powers available to the Trustees under the trust.
16. We confirm that we are applying for the Executive Investment Account as instructed by the member. We confirm that, where appropriate, we have received a copy of the following items. We have read and understand the items which have been explained to our satisfaction before completing this application:
 - i. Product Brochure
 - ii. Product Summary
 - iii. Confirmation of Charges
 - iv. Policy Terms
 - v. Your Guide to Life InsuranceWe further confirm:
 - a. that our financial adviser representative has explained the values/key benefits/information in the Product Summary to our satisfaction; and
 - b. that we have read through all the pages of the Product Summary and understand the benefits of the Policy we are applying for.
17. We understand that in cases where the asset(s) we have selected is not redeemable for a certain period of time, Utmost International may not be able to return that part of our payment until the end of that period. The description of the funds and/or assets we have chosen will give details if this applies. We may invest immediately into non-daily dealing funds with the understanding that in the event of cancellation or requiring early access that:
 - a. we may not get our money back immediately and payment may be delayed for some time;
 - b. the institution may impose penalties and therefore we may get back less than we 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.
18. We are aware of the charges payable on the Executive Investment Account, including the charges payable in respect of the assets which may be held within it. We understand the charges exist partly to meet advice, promotion and distribution expenses. These may include initial and ongoing payments (such as commission) made by Utmost International to our financial adviser representative. These payments could be in addition to any commission payable by the manager of a Collective Fund to our financial adviser representative in respect of the assets held. We understand that Utmost International may receive payments in the form of fund manager rebates, from the manager of a Collective Fund in respect of the assets held, and which Utmost International may share with our financial adviser representative. Further details of the charges payable by us and the amounts payable to our financial adviser representative are available from our financial adviser representative on request.
19. We confirm that we are categorised as a professional client in accordance with the UK Financial Conduct Authority COBS 3.5.2 rules.
20. We appoint the financial adviser representative specified on page 2 of our application form to act on our behalf in accordance with the Policy Terms.

SINGAPORE RESIDENCY DECLARATION

This is a requirement of the Monetary Authority of Singapore (MAS). Please tick the relevant box below.

	QROPS/QNUPS/ IPP/SIPP Trustee	Trustee Applicant 1	Trustee Applicant 2 (if any)
1. I am <u>"ordinarily resident"</u> in Singapore under the following conditions:			
a. citizen of Singapore, as I have not resided outside Singapore continuously for five or more years and/or I am currently residing in Singapore, or			
b. permanent resident or work pass/permit holder, as I have not resided in Singapore for less than a total of 183 days in the last 12 months, or			
c. hold a pass or permit issued under the Immigration Act (Cap. 33) that has a duration longer than 90 days and have resided in Singapore continuously for at least 90 days during the last 12 months.			
2. I am <u>not "ordinarily resident"</u> as per criteria in 1. above but hold Singapore citizenship or relevant pass issued by the Immigration of Checkpoints Authority of Singapore (ICA).			
a. I will provide evidence to support non-residency as per above conditions such as employment letter.			
b. I will not provide evidence to support non-residency as per above conditions. I therefore consent to be considered an "ordinarily resident" of Singapore.			
3. I am <u>not "ordinarily resident"</u> as per criteria in 1. above and do not hold Singapore citizenship or relevant pass issued by the Immigration of Checkpoints Authority of Singapore (ICA).			

STATEMENTS AND VALUATIONS

You can access monthly statements and valuations from our customer website free of charge, we will also send you quarterly valuations free of charge. If you require printed statements and valuations to be sent to you each month, please tick 'yes'. If 'yes' is ticked we will make a charge of US\$105/SG\$210/£70/€105 (or currency equivalent) for each printed statement and valuation.

I/We confirm that I/we wish to receive monthly printed statements and valuations at a cost of US\$105/SG\$210/£70/€105. (✓)	Yes	No
-----------------------------------------------------------------------------------------------------------------------------	-----	----

INFORMATION ON ASSETS

Where requested by you we will provide documents or reports from providers of the underlying assets in which your Portfolio Fund invests. If you require this information, please tick 'Yes'. If 'Yes' is ticked we will charge US\$105/SG\$210/£70/€105 (or currency equivalent) for every document that we send to you.

I/We wish to receive any documents or reports from providers of the underlying assets in which my/our Portfolio Fund invests at a cost of US\$105/SG\$210/£70/€105 (or currency equivalent) for each document that is sent to me/us. (✓)	Yes	No
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----	----

ACCREDITED INVESTOR DECLARATION

I/We confirm that the applicant is an Accredited Investor as defined in the Securities and Futures Act (Cap.289) and amending regulations as being a Trustee of such trust as MAS may prescribe, when acting in the capacity of Trustee. (✓)

Yes

TYPE OF ADVICE

Please confirm the type of advice you wish to receive from your financial adviser representative.

1. Full advice 2. Partial advice 3. No advice

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.

SIGNATURES OF TRUSTEE APPLICANT AND LIFE ASSURED

I/We declare that the information that I/we have provided in this Application Form is true and complete.

QROPS, QNUPS, IPP OR SIPP TRUSTEE APPLICANT

SIGNATURE

Trustee Applicant 1

Name

Capacity

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Trustee Applicant 2

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

LIFE ASSURED SIGNATURES

SIGNATURE

First Life Assured

Date

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Second Life Assured (if any)

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

L VERIFICATION OF CUSTOMER IDENTITY

The QROPS, QNUPS, IPP or SIPP Trustee currently holds acceptable applicant status which has been acknowledged by Utmost International. Otherwise please contact Utmost International.

M FINANCIAL CRIME - RISK RATING (THIS SECTION IS FOR COMPLETION BY THE FINANCIAL ADVISER REPRESENTATIVE)

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 trustee's investment you need to take into account the following factors:

- a. your trustee's country of residence
- b. which country the premium is paid from

(a) + (b) = total risk rating

Please refer to the Source of Funds and Source of Wealth guidelines, available from Utmost International, for information on how to complete the table below.

APPLICANT	TRUSTEE COUNTRY OF RESIDENCE (A)	COUNTRY OF PREMIUM FUNDING (B)	TOTAL RATING
Example	Singapore (1)	Singapore (1)	2

This procedure is for guidance only. Each new application, or application for an additional investment, will be updated individually.

Utmost International reserves the right to request further documentation if it is felt appropriate.

If you are unsure about a particular application, please contact our Singapore office on +65 6216 7990.

N FINANCIAL ADVISER REPRESENTATIVE DECLARATION

This section must be completed in all instances.

Declaration by the financial adviser/suitable certifier

PART 1 - WHO HAS MET THE CLIENT

Please complete one of the following:

- ☐ I have met my client(s) in person
- ☐ I have met my client(s) face-to-face via secure live video stream
- ☐ I have not met my client(s) face-to-face

PART 2 - HOW HAS THE CUSTOMER DUE DILIGENCE (CDD) BEEN OBTAINED

Please confirm which items of CDD have been provided and how they were obtained by ticking the relevant boxes:

Please note 'Obtained via a third party who has met the client face to face' also includes via live video stream.

	OBTAINED BY THE ADVISER DIRECTLY FROM THE CLIENT	OBTAINED VIA A THIRD PARTY WHO HAS MET THE CLIENT FACE TO FACE	PROVIDED DIRECT TO UTMOST INT. BY THE CLIENT
Valid identity document(s)			
Valid proof of residential address			
Source of funds			
Source of wealth documents/information			

Where certification is required, please ensure the following is carried out on each copy document:

I certify this document as a copy of the document that I have seen through <insert method of communication used> held on <x date> between me and the applicant /policyholder. The document has not been tampered with and I have received the same confirmation from the applicant /policyholder

PART 3 - THIRD PARTY DETAILS

If you have confirmed in either Part 1 that you have not met your client face to face or in Part 2 that CDD has been obtained via a third party who has met the client face to face, please provide the following details:

	THIRD PARTY DETAILS 1	THIRD PARTY DETAILS 2
Name of individual(s) that obtained the CDD or met the client face to face		
Date of Birth		
Residential Address		
Registered Company Name		
Registered Company Address		

Where there is more than two third parties involved in obtaining CDD, please contact your Utmost International Sales Consultant for further guidance.

PART 4 - FINANCIAL ADVISER DECLARATION

I declare that:

- › I have taken reasonable steps to ensure that the funding is legitimate and in line with the client's circumstances.
- › 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.
- › I have not made any changes to the application form after the client has signed it
- › I have verified the contents of the original documents where copies have been enclosed and that they are true copies of the original.

By providing certification for Customer Due Diligence documents where these have been viewed and verified via secure live video stream, you confirm:

1. That the client held their ID beside their face to confirm the document as a true likeness.
2. 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.
3. 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 upon request.

EXECUTIVE INVESTMENT ACCOUNT
APPLICATION FORM NEW BUSINESS AND TOP-UP

I confirm that I gave advice concerning this investment to the applicant(s) in (name of country)

on

d	d	m	m	a	a	a	a
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Regulatory body authorisation number (if applicable)

Regulator name

Utmost International financial adviser account number

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Financial adviser

SIGNATURE

Full name of financial adviser

Date

d	d	m	m	a	a	a	a
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Financial adviser stamp

NOTE

This form is unacceptable if not dated by the signatories.

OFFICE USE ONLY

Policy number

Net premium amount

Utmost International Isle of Man Limited Singapore Branch 'Utmost International' is a member of the Policy Owners' Protection Scheme (PPF Scheme) in Singapore. However, this Policy issued by Utmost International (where no additional life cover purchased) is not covered under the PPF Scheme. Details of the PPF Scheme can be obtained at Singapore Deposit Insurance corporation Limited's website on www.sdic.org.sg

A WEALTH *of* DIFFERENCE

www.utmostinternational.com

Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Utmost Wealth Solutions is the registered business name of Utmost International Isle of Man Limited Singapore Branch.

Utmost International Isle of Man Limited Singapore Branch, 6 Battery Road #16-02, Singapore 049909.

Tel: +65 6216 7990 Fax: +65 6216 7999.

Registered in Singapore Number T08FC7158E. Authorised by the Monetary Authority of Singapore to conduct life assurance business in Singapore.

Member of the Life Insurance Association of Singapore. Member of the Singapore Finance Dispute Resolution Scheme.

Utmost International Isle of Man Limited is registered in the Isle of Man under number 024916C.

Registered Office: King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles.

Licensed by the Isle of Man Financial Services Authority.

Utmost Wealth Solutions is registered in the Isle of Man as a business name of Utmost International Isle of Man Limited.

ULQ PR 08401 | 01/24

EXECUTIVE INVESTMENT ACCOUNT

BANK DETAILS AND PAYMENT METHODS

Please do not use correction fluid; any amendments should be crossed out and initialled.

Please forward this document to Utmost International Isle of Man Limited Singapore Branch, 6 Battery Road #16-02, Singapore 049909.

TELEGRAPHIC TRANSFER DETAILS

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.

Payments from Singapore Banks in Singapore dollars, US dollars, euros and sterling.

Account name:	Utmost International Isle of Man Limited Singapore Branch
Swift code:	HSBC SGSGXXX
Branch:	HSBC
Branch address:	21, Collyer Quay, HSBC Building, Singapore 049320
A/c Singapore dollar:	147-409064-001
A/c US dollar:	260-601471-178
A/c Euro:	260-601471-179
A/c Sterling:	260-601471-180

Payments from overseas banks and other currency payments (SWIFT payments).

Payments should be effected to Utmost International Isle of Man Limited's accounts held below.

Swift code:	NWBKGB2LXXX
Bank:	National Westminster Bank (01-10-01)
Bank address:	1 Hardman Boulevard, Manchester, M60 2AQ
Beneficiary:	Utmost International Isle of Man Limited
Account Number:	(Select as applicable):

IBAN number	Account number
1. US dollar - GB05NWBK60730167544800	140-0-67544800
2. Euro - GB63NWBK60720267545858	550-1-67545858
3. Australian dollar - GB18NWBK60730167535836	160-1-67535836

EXECUTIVE INVESTMENT ACCOUNT
BANK DETAILS AND PAYMENT METHODS

4.	Canadian dollar - GB80NWBK60730167521916	150-1-67521916
5.	Danish krone - GB22NWBK60730167545270	175-1-67545270
6.	Hong Kong dollar - GB52NWBK60730167555691	338-1-67555691
7.	Japanese yen - GB40NWBK60730167538835	349-1-67538835
8.	New Zealand dollar - GB26NWBK60730167576141	217-1-67576141
9.	Norwegian krone - GB23NWBK60730167568823	222-1-67568823
10.	Singapore dollar - GB53NWBK60730167598838	409-1-67598838
11.	Swedish krona - GB69NWBK60730167554997	232-1-67554997
12.	Swiss franc - GB14NWBK60730167541534	234-1-67541534

GBP Payments

Swift code: RBOSIMD2XXX

Bank: Isle of Man Bank, East Region (55-91-00)

Bank address: East Region, Athol Street, Douglas, Isle of Man

13.	Sterling - GB94NWBK55910010939946	440-00-10939946
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IMPORTANT

- › Please make sure that the applicant's name and/or Account number (if reserved) 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.
- › Please note that when sending payments electronically spaces should be excluded from the IBAN numbers.
- › All bank charges, such as telegraphic transfer charges, are the responsibility of the applicant, not Utmost International.

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