

# CHANGE OF REGULAR CONTRIBUTION FORM



## INTERNATIONAL INVESTMENT SOLUTIONS

### BEFORE YOU BEGIN

You should use this form if you wish to make any changes to your regular contribution into your Flexible Investment Plan. This includes suspending or stopping payments, decreasing the payment amount, and changing the collection date or frequency.

Please complete all relevant sections of this form by typing in the fields. Once complete, print and sign using a pen.

Alternatively, print and complete in **BLOCK CAPITALS** and in **blue or black ink**.

If any of the information on this form needs to be changed, it should be initialled by all policyholders.

### CHECK DETAILS THAT HAVE ALREADY BEEN COMPLETED

If any details are already completed (based on what you have told your financial adviser), you should check these before you sign the declarations in section E.

### 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 [utmostinternational.com/privacy-statements](https://utmostinternational.com/privacy-statements) or you can request a copy from our Client Relations Team.

### WHAT TO DO WHEN YOU HAVE COMPLETED THIS FORM

Return the completed form, by post, to Utmost PanEurope dac.

**Utmost PanEurope dac, Ashford House, Tara Street, Dublin 2, D02 VX67, Ireland.**

## A WEALTH *of* DIFFERENCE

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

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

Utmost PanEurope dac is regulated by the Central Bank of Ireland (No 311420). Its registered office is Navan Business Park, Athlumney, Navan, Co. Meath C15 CCW8, Ireland. Utmost PanEurope dac is a Category A Insurance Permit holder with the Jersey Financial Services Commission.

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

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**A** POLICYHOLDER DETAILS

Complete details of all policyholders. If more than four policyholders are involved, please photocopy or re-print this section of the form, complete and make sure the additional policyholders sign the declaration.

Policy number																
	<b>Policyholder 1</b>								<b>Policyholder 2</b>							
Policyholder name																
Date of birth	d	d	m	m	y	y	y	y	d	d	m	m	y	y	y	y
Address																
Postcode																
Taxpayer identification number(s)*	a.								a.							
	b.								b.							
Jurisdiction(s) of tax residence**	a.								a.							
	b.								b.							
	<b>Policyholder 3</b>								<b>Policyholder 4</b>							
Policyholder name																
Date of birth	d	d	m	m	y	y	y	y	d	d	m	m	y	y	y	y
Address																
Postcode																
Taxpayer identification number(s)*	a.								a.							
	b.								b.							
Jurisdiction(s) of tax residence**	a.								a.							
	b.								b.							

\*Taxpayer identification number - this is the number that the tax authority uses to identify you. For example, in the UK it would be your National Insurance number or your company tax number. This is required so we can fulfil our reporting obligations to the Irish Revenue.

\*\*Please give details of all of tax jurisdictions you are resident in. This is required so we can fulfil our reporting obligations to the Irish Revenue.

Is this a change of address? ☐ No ☐ Yes

Correspondence address  
(if different from the address we currently use)

Postcode

Telephone number

Email address

Please enclose a copy of an original certified, signed and dated, proof of address document dated within the last six months.

## B REGULAR CONTRIBUTION CHANGE

You should complete this section if you wish to suspend or stop your regular contributions into your plan.

- › If you wish to temporarily suspend payments of your regular contributions (i.e. take a contribution holiday), please complete section B1
- › If you wish to permanently stop all future contributions, please complete section B2.

We must receive this instruction at least 10 business days before the next collection date.

### B1 - CONTRIBUTION HOLIDAY

Date last contribution to be collected

d	d	m	m	y	y	y	y
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Date contributions are to be restarted

d	d	m	m	y	y	y	y
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### B2 - STOP PAYMENT OF ALL FUTURE CONTRIBUTIONS

Please be aware that once you select this option you cannot make any future contributions to your plan.

Date last contribution to be collected

d	d	m	m	y	y	y	y
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If you have requested a contribution holiday and have cancelled the standing order instruction with your bank, you will need to set up a new standing order instruction to us before regular contribution payments can be restarted.

If we are not able to successfully collect your regular contribution payments within 30 days of your chosen restart date, we will automatically stop payments of all future contributions and you will not be able to make any further contributions to your plan.

## C DECREASE OF REGULAR CONTRIBUTION AMOUNT

You should complete this section if you wish to decrease the level of regular contributions into your plan.

The minimum regular contribution is £500 (if paid monthly) or £5,000 (if paid yearly).

After you decrease your regular contribution, it cannot be increased in the future.

New regular contribution amount.

£
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First month your new contribution amount is to be collected - the actual day in the month will not change from the original date chosen.

m	m	y	y	y	y
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Contributions will continue to be invested in the funds currently selected. If you require changes to existing funds, or to where contributions will be invested in the future, please complete our '**Internal Funds Switch Instruction Form**'.

**D** REGULAR CONTRIBUTION COLLECTION DETAILS

You should complete this section if you want to change either your contribution collection date, or the collection frequency.

- › If you wish to change the collection date for payments of your regular contributions, complete section D1
- › If you wish to change the collection frequency for payments of your regular contributions, complete section D2.

We will apply these changes from the next available collection date.

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**D1 - AVAILABLE CONTRIBUTION COLLECTION DATES**

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New contribution collection date  
(select one collection date within the  
calendar month if you require the  
collection on a monthly basis)

☐ 1☐ 8☐ 16☐ 25

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**D2 - CONTRIBUTION COLLECTION FREQUENCY**

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New contribution frequency

☐ Monthly☐ Yearly

## E DECLARATION

In this declaration, 'I/We' means the policyholder(s) and 'you' means Utmost PanEurope dac.

I/We declare that the answers to the questions on this form are true to the best of my/our knowledge and belief and I/we agree that they will form the revised basis of the contract.

I/We have read over the answers filled in on my/our behalf and confirm they are correct.

I am/We are aged 18 years and over.

I am/We are not resident in the United States of America (US) for tax purposes, or a US citizen and I am/we are not required to file any US tax returns.

I/We shall co-operate with you and provide such assistance as you may require from time to time to ensure compliance with any legal and regulatory obligations, including the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) for Automatic Exchange of Financial Account Information.

FOR TRUSTS ONLY

I/We declare that the settlors, beneficiaries, protectors and trustees of the trust, are not resident in the US for tax purposes, are not US citizens and are not required to file US tax returns.

I/We declare that a court within the US would not have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust named in this form.

I/We declare that I am/we are not acting on behalf of an estate of a decedent that is a citizen or resident of the US.

FOR COMPANIES ONLY

I/We declare that the company is not a partnership or corporation organised in the US or under the laws of the US or any State thereof.

I/We declare that the beneficial owners of the company are not resident in the US for tax purposes, are not US citizens and are not required to file US tax returns.

	Policyholder 1	Policyholder 2
SIGNATURE	<div></div>	<div></div>
Print full name	<div></div>	<div></div>
Date	<div> <div>d</div> <div>d</div> <div>m</div> <div>m</div> <div>y</div> <div>y</div> <div>y</div> <div>y</div> </div>	<div> <div>d</div> <div>d</div> <div>m</div> <div>m</div> <div>y</div> <div>y</div> <div>y</div> <div>y</div> </div>

  

	Policyholder 3	Policyholder 4
SIGNATURE	<div></div>	<div></div>
Print full name	<div></div>	<div></div>
Date	<div> <div>d</div> <div>d</div> <div>m</div> <div>m</div> <div>y</div> <div>y</div> <div>y</div> <div>y</div> </div>	<div> <div>d</div> <div>d</div> <div>m</div> <div>m</div> <div>y</div> <div>y</div> <div>y</div> <div>y</div> </div>