

REQUEST TO APPOINT A DISCRETIONARY ASSET MANAGER (ON A DISCRETIONARY BASIS)

Utmost Wealth Solutions is the brand name used by a number of Utmost companies. This item has been issued by Utmost International Isle of Man Limited (including its branches).

For use with the Executive Investment Account, Executive Investment Bond, Tailored Life Plan and Silk Life Plan only.

THIS DOCUMENT WAS LAST UPDATED IN DECEMBER 2025.

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

IMPORTANT NOTES

THIS DOCUMENT WAS LAST UPDATED IN DECEMBER 2025.

'I', and 'We' mean the Policyholder where applicable. 'The Company' refers to Utmost International Isle of Man Limited and its branches.

'Discretionary Asset Manager' and 'Dealing Desk' have the same meaning as that given in the Policy Terms (including the Endorsement to amend the terms for Discretionary Asset Manager).

When completing this form, please use **BLOCK CAPITALS** and **blue/black ink** only and complete all relevant sections.

Please do not use correction fluid; any amendments should be crossed out and initialled by all policyholders. Any incomplete information will need to be confirmed in writing by you once Utmost International has received the form.

Policy number
(if known)

Type of investor

Individual

Trustee

Corporate

A DETAILS OF TRUSTEE POLICYHOLDER (IF APPLICABLE)

The trust name is
(for example 'the John Brown
Will Trust')

B DETAILS OF CORPORATE POLICYHOLDER (IF APPLICABLE)

Corporate name

C DETAILS OF INDIVIDUAL POLICYHOLDER(S) (IF APPLICABLE)

If there are any further policyholders, please photocopy this policyholder section, attach the details with this form and tick here.

	Policyholder 1	Policyholder 2 (if any)
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other <input style="width: 150px; height: 15px;" type="text"/>	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other <input style="width: 150px; height: 15px;" type="text"/>
Full forename(s)	<input style="width: 250px; height: 20px;" type="text"/>	<input style="width: 250px; height: 20px;" type="text"/>
Surname	<input style="width: 250px; height: 20px;" type="text"/>	<input style="width: 250px; height: 20px;" type="text"/>

D POLICYHOLDER(S) ADDRESS (TRUSTEE, CORPORATE AND INDIVIDUAL)

Residential address (Where you are currently living. We are unable to accept PO Box and 'care of' addresses)	<input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> Postcode <input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> Postcode <input style="width: 100px; height: 20px;" type="text"/>
Registered office address (Corporate and Corporate Trustee Policyholders only. This information must be provided in full. We are unable to accept PO Box and 'care of' addresses)	<input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> Postcode <input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> <input style="width: 250px; height: 20px;" type="text"/> Postcode <input style="width: 100px; height: 20px;" type="text"/>
Daytime telephone number including dialling code	<input style="width: 250px; height: 20px;" type="text"/>	<input style="width: 250px; height: 20px;" type="text"/>
E-mail address	<input style="width: 250px; height: 20px;" type="text"/>	<input style="width: 250px; height: 20px;" type="text"/>

E DETAILS OF THE DISCRETIONARY ASSET MANAGER

MANDATORY

Please note the appointed person or firm below will have discretionary regulatory authority to carry out discretionary investment management activities based on an agreed investment mandate and does not need to agree changes to the assets with the Company before they submit asset dealing instructions. The appointed person or firm MUST have a Discretionary Asset Management Agreement in place with the Company.

Name of Discretionary Asset Manager	<input style="width: 550px; height: 20px;" type="text"/>
Date of Discretionary Asset Manager Appointment	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
Firm name	<input style="width: 550px; height: 20px;" type="text"/>
Registered address	<input style="width: 550px; height: 20px;" type="text"/>
Discretionary Asset Manager's	<input style="width: 450px; height: 20px;" type="text"/> Postcode <input style="width: 100px; height: 20px;" type="text"/>
Regulatory Authority	<input style="width: 550px; height: 20px;" type="text"/>
Licence number	<input style="width: 550px; height: 20px;" type="text"/>
Discretionary Asset Manager	<input style="width: 550px; height: 20px;" type="text"/>

If the Discretionary Asset Manager is being appointed to manage the assets held with an Authorised Custodian, please enter the name of the Authorised Custodian below.

F DISCRETIONARY ASSET MANAGER CHARGE

The charge (inclusive of VAT or other applicable tax, if any) for this service is as follows:

% each year (to be taken quarterly) of the value of the assets held by the Authorised Custodian shown above, or

where there is no Authorised Custodian named, in respect of the assets held by the Company's Default Custodian.

The charge detailed above is paid by the Company. This charge will be reflected as a portfolio fund charge known as the Discretionary Asset Manager Charge. This charge will be deducted in the bond currency and paid quarterly. Please refer to your Policy Terms (including the Endorsement to amend the terms for Discretionary Asset Manager) for further information on the Discretionary Asset Manager Charge.

G INVESTMENT MANDATE

If the investment objectives for the portfolio fund have already been provided on separate documentation then instead of completing 1, 2 and 3 below you can choose to enclose these documents with this request form. If you wish to do this, then please confirm the name of this documentation below.

Name of documentation enclosed with this request form

1. Investment strategy

2. Risk criteria

3. Investment restrictions

H DISCRETIONARY AUTHORITY DECLARATION - TO BE SIGNED BY THE POLICYHOLDER(S)

This declaration is made by each policyholder for individual policyholders, the trustees jointly for trustee policyholders, or the authorised signatory on behalf of a corporate or corporate trustee policyholder.

1. I/We hereby request that the Discretionary Asset Manager be appointed by the Company. As Discretionary Asset Manager to manage the assets linked to the relevant Portfolio Fund for my/our Policy.
2. I/We understand that the Discretionary Asset Manager must have a Discretionary Asset Management Agreement in place with the Company.
3. I/We understand that the management of the relevant Portfolio Fund shall be at the discretion of the Discretionary Asset Manager.
4. I/We acknowledge that I/we shall be responsible for any costs arising associated with the appointment of the Discretionary Asset Manager and understand that the Discretionary Asset Manager Charge resulting from the Company paying the charge shown above to the Discretionary Asset Manager will be a charge against the Portfolio Fund as described in the Policy Terms.
5. I/We have agreed with the Discretionary Asset Manager the investment objectives shown or referred to in the Investment Mandate on page three for the Portfolio Fund for which I/we will be wholly responsible. The Company will not be responsible for any investment strategy or objectives pursued by the Discretionary Asset Manager or myself/ourselves but I/we understand that the Company does place restrictions on the types of investments that may be selected in accordance with the Policy Terms.
6. I/We understand that I/we will be responsible for monitoring the assets held to ensure they align with my/our investment strategy, risk criteria and investment restrictions and I/we will inform the Company if these change. I/We understand that the Company can accept no responsibility for the effects of any delay or failure to inform them of any such change.
7. I/We confirm that I/we have received a copy of the Policy Terms, including the Endorsement to amend the terms to add a Discretionary Asset Manager, and have read them before completing this request form.

	Signatory 1	Signatory 2
SIGNATURE		
Full Name		
Capacity	<input type="checkbox"/> Individual <input type="checkbox"/> Trustee <input type="checkbox"/> Third party/pledge interest <input type="checkbox"/> Director/Authorised Signatory <input type="checkbox"/> Other	<input type="checkbox"/> Individual <input type="checkbox"/> Trustee <input type="checkbox"/> Third party/pledge interest <input type="checkbox"/> Director/Authorised Signatory <input type="checkbox"/> Other
	Signatory 3	Signatory 4
SIGNATURE		
Full Name		
Capacity	<input type="checkbox"/> Individual <input type="checkbox"/> Trustee <input type="checkbox"/> Third party/pledge interest <input type="checkbox"/> Director/Authorised Signatory <input type="checkbox"/> Other	<input type="checkbox"/> Individual <input type="checkbox"/> Trustee <input type="checkbox"/> Third party/pledge interest <input type="checkbox"/> Director/Authorised Signatory <input type="checkbox"/> Other

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(ON A DISCRETIONARY BASIS)

This section should only be completed where a trust is being declared as part of the application process.

In relation to the trust submitted with this application, we (the trustees to the trust) request appointment of the Discretionary Asset Manager appointed on a discretionary basis and acknowledge and confirm the contents of this document. In particular, the policyholder investment mandate and declarations above.

	Authorised signatory 1	Authorised signatory 2
SIGNATURE	<input type="text"/>	<input type="text"/>
Full Name	<input type="text"/>	<input type="text"/>
	Authorised signatory 3	Authorised signatory 4
SIGNATURE	<input type="text"/>	<input type="text"/>
Full Name	<input type="text"/>	<input type="text"/>

Utmost International Isle of Man Limited does not offer legal, tax or financial advice and we can accept no responsibility for any action taken or refrained from 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.

A WEALTH *of* DIFFERENCE

www.utmostinternational.com

Utmost International Isle of Man Limited Singapore Branch is registered in Singapore (UEN T08FC7158E). Registered Office address: 6 Battery Road, #16- 02, Singapore 049909.

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 (registered number 024916C) is registered in the Isle of Man. Registered Office address: King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles.

Utmost International Isle of Man Limited is licensed by the Isle of Man Financial Services Authority as an Authorised Insurer.

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

ULQ PR 18474 | 12/25