# COLLECTIVE OR EXECUTIVE BOND



## APPLICATION FORM - NEW BUSINESS AND TOP-UP

#### For individual, corporate and trustee investors

#### THIS DOCUMENT WAS LAST UPDATED IN NOVEMBER 2023.

Please confirm with your Financial Adviser that this is the most up-to-date document for your 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.

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FINANCIAL ADVISER	DETAILS			
Utmost International account number				
Adviser company name				
Name of Financial Adviser				
Adviser company address				
				Postcode
Telephone number				
E-mail address				
Utmost International only acce	epts business intro	oduced by Financial Ad	lviser cor	mpanies which have Terms of Business with us.
NOTES - BEFORE YOU	COMPLETE	YOUR APPLICATI	ON	

We only sell our products through Financial Advisers as we believe it is important that you receive independent financial advice. As it is you who chooses your Financial Adviser, 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, **we**, **us** and **our** in this application form mean Utmost International Isle of Man Limited who is the provider of the Collective and Executive Bonds.

#### IMPORTANT INFORMATION FOR YOU - THE APPLICANT

For individual and trustee applicants only: 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.

Please note this application form should not be used by applicants resident in the UK, Hong Kong, Singapore or the United States of America or its territories, as there are alternative local products available and marketed at the specific jurisdiction or where Utmost International is unable to accept any premiums from the residents of the United States of America and its territories.

Before completing the application form, please make sure you have received and read through the relevant product literature:

- > the Collective Bond brochure entitled 'Perfectly tuned investments' or the Executive Bond brochure entitled 'The discerning investor',
- the policy terms 'Details of your Collective Investment Bond' (ref CIB4), 'Details of your Collective Redemption Bond' (ref CRB5), 'Details of your Executive Investment Bond' (ref EIB4), or 'Details of your Executive Redemption Bond' (ref ERB4).
- the 'Collective Investment Bond at a glance', 'Collective Redemption Bond at a glance', 'Executive Investment Bond at a glance', or 'Executive Redemption Bond at a glance'.
- the 'charge sheet', which confirms the charges that will apply to your Bond.

Your Financial Adviser will be able to provide you with the relevant Collective or Executive Bond product literature.

#### NOTE

#### **Key Information Document (KID)**

A KID is a short document that describes the product's key features and target market, as well as the cost of owning the product and the risks associated with investment. It allows you to make comparisons with similar products from Isle of Man Financial Services Authority authorised insurers.

Under the Isle of Man Financial Services Authority's Insurance (Conduct of Business) (Long Term Business) Code 2021, Utmost International is required to provide you with a KID if you are applying for a new bond or adding to a bond that you started after 31 December 2017. Where it's applicable, you should make sure you read your KID before completing this application. It can be obtained from your Financial Adviser.

If you are starting a new bond, you must sign and return the KID to Utmost International before we can accept your application.

If you are adding to an existing bond, you do not need to return the KID to us.

#### Online service account on Wealth Interactive

For individual applicants only: When you apply for your Bond, we will automatically set you up with an Online Service Account on our online service Wealth Interactive.

You will receive an email from us containing a link that lets you activate this service.

Once your policy and your Online Service Account are live, you can sign in to Wealth Interactive whenever you want to review your policy and carry out key transactions.

You can also find all the information you need about your investment with us in one place.

When we need to send you communications, such as policy valuations for example, we will generally do this through your Online Service Account, although there will be times when we still need to correspond with you by post.

If you would prefer to receive ongoing communication from us by post rather than online, please tick here (1)

#### YOUR RIGHT TO CANCEL

You have the right to cancel your bond 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 bond. 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 bond Terms & Conditions.

\*Where relevant, applicable charges include non-refundable fund charges, fees we have paid to your Financial Adviser on your behalf and bank charges.

#### COMPLETING THE FORM

To complete this form:

- y use CAPITAL LETTERS only
- ) use blue or black ink
- > specify choices as appropriate
- > complete all relevant sections
- > do not use correction fluid cross through any amendments (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 to us in writing, and this may delay your application.

#### NOTE

#### **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.

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A TYPE OF APPLICAT	ION					
TYPE OF APPLICATION						
Type of client (✓)	Individual	Joint	Corporate/Corporate Trustee	Trustee		
If this is an application for a NEW	/ BOND, please indicat	e which type	of bond you are applying for: (🗸)			
Life assurance - Collective Investment Bond Capital redemption - Collective Redemption Bond						
Life assurance - Executive I	demption - Executive Redemption Bond					
REASON FOR INVESTME	ENT					
e.g. saving for retirement						
POLICY CURRENCY						
I wish my policy to be valued in (✓)	€ US\$	£	Other (state currency)			
Please note if no currency is ent BE CHANGED AFTER THE POLI		ncy will be po	und sterling ( $f f$ ). THE POLICY CURRENC	Y CANNOT		
ADDITIONAL INVESTME	NT					
If this is an application for an AD existing policy number: (you can						
NOTE						
and life assured (if applicable	e) in section B1 if you a	re an individu	full forename(s) and surname of each p al applicant/trustee, or the name of the c ions must also be completed.			

#### B1 DETAILS OF THE APPLICANT(S)/TRUSTEE(S)

Applicants must be at least 18 years old and no older than 89 years. The maximum age for a life assured is 89 years.

If there are any further applicants, please photocopy this page, have the additional pages signed by all the applicants and attach the details with this application form and tick here  $(\checkmark)$ 

#### NOTE

If additional pages are added, each separate page must be initialled by all applicants.

## COLLECTIVE OR EXECUTIVE BOND APPLICATION FORM - NEW BUSINESS AND TOP-UP

	Applicant/Trustee 1				Applicant/Trustee 2 (if any)			
Title (✓)	Mr	Mrs	Miss		Mr	Mrs	Miss	
	Other				Other			
Forename								
Middle name(s)								
Last name								
Maiden name, previous name or alias								
Sex ( <b>✓</b> )	Male	Fem	nale		Male	Fe	male	
Date of birth	d d m m	n y y	уу		d d m m	У	/ y y	
Nationality								
Dual nationality (if applicable)								
Passport number/national identity card number Residential/home address								
(Where you are currently living. We do not accept c/o and PO Box addresses)								
	Country		Postcode		Country		Postcode	
Correspondence address (If left blank we will use your residential address for correspondance)								
	Country		Postcode		Country		Postcode	
Utmost International accepts no raddress, or to an address notified residential address where regulat	esponsibility fo	. Utmost I	nternational res	erves the	ocumentation to			
We can only accept one corresponding is blank.	ondence addre	ss for the	bond and will d	efault to A	Applicant/Trust	ee 1 re	sidential addr	ess if
Telephone number including area code (daytime)								
Telephone number including area code (evening)								
Individual email address (Please note each client must have a unique email address)								

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#### EMPLOYMENT DETAILS

#### This section must be completed in all instances.

Please give details of your employer or your own company, if self-employed.

If you have retired or are not currently employed please include details of your previous employer or your own company. Please also enter your final year's salary/income and bonus if any. If you have never been employed, please state N/A.

Applicant/Trustee 1				Applicant/Trustee 2 (if any)			
Employment status (✔)	Employed	Self	Employed	Emplo	yed	Self Employed	
	Retired	Not	employed	Retired		Not employed	
Date of retirement/ unemployment (if applicable) Company name	d d m m	у у у	У	d d m	m y y	уу	
Full address of company							
	Postcode			Postcode			
Country							
Company website (if any)							
Occupation(including role, e.g. Director and sector, e.g. Accountancy. If you have retired please include your occupation before retirement. Please check that the occupation is not on our list of prohibited occupations as confirmed on our Source of Funds and Source of Wealth guidelines)							
Last year's gross salary							
Salary currency	€ £	US\$		€	£	US\$	
	Other (stat	e currency)		Other	(state curre	ency)	
Last year's bonus							
Bonus currency	€ £	US\$		€	£	US\$	
	Other (stat	e currency)		Other	(state curre	ency)	
If you receive income from another source, please provide full details here. (e.g. Dividend, Investment, rental income including their nature and source)							

LEAD POLICYHOLDER FO	OR THE ONLINE SEI	RVICE ACCOUNT			
If there is more than one applicar must agree to select the same Le		t select one applicant to be the Lead	d Policyholder. Each applicant		
We, the applicants, appoint (inser	rt name in the box)		to act as the Lead		
Policyholder for the policies com	prising our Collective/Exec	cutive Bond in accordance with the F	Policy Terms.		
The specific e-mail address which (Please note each client must havusers on Wealth Interactive.)		e Service Account is An email address cannot be shared	by		
B2 CORPORATE/CORPO	DRATE TRUSTEE AP	PLICANT			
In this section, please give details	of the corporate applican	t.			
CORPORATE/CORPORAT	E TRUSTEE APPLIC	ANT			
Please tick (✔)	Private company	Public company	Other		
Corporate name					
Contact person					
Country of registration					
Date of incorporation	d d m m y y y	у			
Registered office address (This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses)	Country	Postcode			
Correspondence address		<u> </u>			
(If left blank we will use the residential address for					
correspondence)	Country	Postcode			
	subsequently. Utmost Inte	quences of sending documentation rnational reserves the right to send to any other address.			
We will default to the registered office address if the correspondence address field is not completed.  Telephone number including area code (daytime)  E-mail address					
Corporate website address					
Please explain the company's main business (for example manufacturing or trading company)					

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AUTHORISED SIGNATOR	IES						
Please confirm the minimum num instructions	nber of autho	orised signator	ries of the	company n	eeded to give		
NOTE							
The company directors/autho Additional documents are necessare executive director of the compand at least one other authorical	eded to evide pany. If there	ence the iden is only a sole	tity of at le	east two dire	ectors, one of w	hom mu	st be an
B3 DETAILS OF THE TR	UST (IF A	PPLICABL	E)				
In this section, please give the fol 1990', 'the John Brown Will Trust'					le, 'the Mary Jo	nes Polic	cy Trust dated 1 April
The trust name is:							
The trust was created on:	d d m	m y y y	у				
Trust details: (Please explain the reason for the establishment of the trust, what type of trust it is and detail the source of the trust assets and country of origin.)							
TRUST ASSETS							
Please provide an indication of th	ne total value	of the trust's a	assets				
Currency (✔)	€	US\$	£	Other (sta	ite currency)		
Country							
B4 POLITICALLY EXPO	SED PERS	ON					
If the applicant(s), or any other pa politically exposed person (PEP), on holding an important public posit senior politicians, senior executive	or connected ion, or a pers	with a PEP, ple on clearly rela	ease provi ted to the	de details. <i>A</i> m. Example:	A politically expose s of these are: jo	osed per udicial or	son is someone military officials,
PEP Name							
Connection to applicant							
Details of why they are considered a PEP							

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 available from the literature library on www.utmostinternational.com. We may also require Source of Wealth evidence.

B5 EXISTING CON	TRACTS							
Please provide details of an	y existing Utmost Interr	national contracts you ha	ave or are making pay	yments to (if applicable).				
Type of contract	ype of contract Type of contract							
Policy number		Pol	icy number					
All applicants must comple	ete and sign the declar	ation in Section J.	L					
C DETAILS OF TH	E LIFE/LIVES AS	SURED						
NOTE  Do not complete this se capital redemption bon				are no lives assured on a				
Minimum age for life assur	ed is three months and	l maximum age is 89 ye	ears.					
Is the applicant(s) also goin	g to be a life assured?	Γick if yes (✓)						
assured. If there are any further lives	Please note you do not need to complete this section if the applicant(s) is/are going to be the only life/lives assured. If there are any further lives assured, please photocopy the next page, have the additional pages signed by all the applicants and attach the details with this application form and tick here ( $\checkmark$ )							
	First/additional	l <b>ife assured</b> (if any)	Second/add	litional life assured (if any)				
Title (✔)	Mr	Mrs Miss	Mr	Mrs Miss				
	Other		Other					
Forename								
Middle name(s)								
Last name								
Maiden name, previous nar or alias	me							
Gender (✔)	Male	Female	Male	Female				
Date of birth	d d m m	у у у у	d d m	m y y y y				
Nationality								
Dual nationality (if applicable) Residential/home address (Where you are currently liv We do not accept c/o and F Box addresses)	20							
B. L	Country	Postcode	Country	Postcode				
Relationship of life assured applicant	to							

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†or other currency equivalent

#### D

#### UTMOST INTERNATIONAL CHARGES

#### NOTE

Before completing this section, please ask your Financial Adviser for a copy of the charging structure details recommended to you.

The charging structure for your bond is based upon the reference code provided on this application; this will dictate the level, term and type of charges that apply and these will be confirmed to you in your policy documents. These charges will include our administration costs together with those incurred in making any initial commission payment to your Financial Adviser.

If you have agreed to pay your Financial Adviser an ongoing commission payment then this will be reflected in the deduction of an additional Ongoing Service Charge equivalent to the amount agreed.

UTMOST INTERNATIO	NAL'S CHARGES			
Adviser has explained will app	Utmost International charge package the plant of the state of the second of	ost Ínternational		
Please enter Allocation Percer for this bond (if applicable)	ntage %	Please enter the Or Service Charge (if a		%
E INVESTMENT DET	AILS			
PREMIUM PAYMENT				
Amount to be invested (in policy currency)				
Payment method (✓)	Electronic bank transfer	Cheque	Asset transfer	
NOTE				
The premium payment mu	st come from an account held in the na	ame of the applicant(	s).	
The minimum initial investi additional investment is £2	ment amount for the Collective Bond is $2,500 \text{ (US$3,750,} \le 3,750^{\dagger}\text{)}.$	s £25,000 (US\$37,500	), €37 500†) and the minimum	
The minimum initial investi additional investment is £2	ment amount for the Executive Bond is 2,500 (US\$3,750, €3 750†).	£50,000 (US\$75,000	), €75 000†) and the minimum	
Please enclose your copy obond/account' form with the	of receipt of your electronic bank trans nis application form.	fer payment and you	r 'Transferring Assets to your	

#### STERLING PAYMENTS

SIEKLING	STERLING PAYMENTS							
From UK ban	ks (CHAPS* payments)	From non-UK banks (SWIFT** payments)						
Sort code:	55-91-00	SWIFT code:	RBOSIMD2XXX					
Bank:	Isle of Man Bank, East Region, 2 Athol Street, Douglas, Isle of Man	Sort code:	55-91-00					
Beneficiary:	Utmost International Isle of Man Limited	Bank:	Isle of Man Bank, East Region, 2 Athol Street, Douglas, Isle of Man					
IBAN***:	GB94NWBK55910010939946	Beneficiary:	Utmost International Isle of Man Limited					
		IBAN:	GB94NWBK55910010939946					

#### OTHER CURRENCY PAYMENTS (SWIET PAYMENTS)

Payments should be made to Utmost International Isle of Man Limited's accounts held with National Westminster Bank, London.

- a) mente en esta de made te et mentational inte en man Elimica e accounte mola man material vicosimilator de made in					
SWIFT code:	NWBK	GB2LXXX			
Bank:	Nationa	al Westminster Bank, London			
IBAN:	(select	as applicable, see below)			
1. US Dollar		IBAN - GB05NWBK60730167544800			
2. EURO		IBAN - GB63NWBK60720267545858			
3. Australian D	ollar	IBAN - GB18NWBK60730167535836			
4. Canadian D	ollar	IBAN - GB80NWBK60730167521916			
5. Danish Kron	ie	IBAN - GB22NWBK60730167545270			
6. Hong Kong	Dollar	IBAN - GB52NWBK60730167555691			
7. Japanese Ye	en	IBAN - GB40NWBK60730167538835			
8. New Zealan	d Dollar	IBAN - GB26NWBK60730167576141			
9. Norwegian I	Krone	IBAN - GB23NWBK60730167568823			
10. Singapore Dollar		IBAN - GB53NWBK60730167598838			
11. Swedish Krona		IBAN - GB69NWBK60730167554997			
12. Swiss Franc	С	IBAN - GB14NWBK60730167541534			

<sup>\*</sup> CHAPS is an electronic bank-to-bank same day value payment made in the UK in pound sterling (£).

#### HOW THE BOND ASSETS ARE INVESTED AND MANAGED

In this section, please tell us how your bond will be invested and how it will be managed. You can request Utmost International to appoint a Discretionary Asset Manager or you can appoint a fund adviser to manage the Assets held with each custodian.

**Default Custodian** - Assets held by Utmost International

Authorised Custodian - Assets held by an authorised third party custodian

#### The options available to choose from are:

- 1. All Assets held by our default custodian
- 2. Some Assets held by our default custodian and some by an authorised custodian
- 3. All Assets held by an authorised custodian
- 4. All Assets held by up to three different authorised custodians

Where you request to appoint more than one authorised custodian, you also need to select a lead custodian who we will instruct to sell Assets to pay for portfolio fund charges debited to the transaction account held with Utmost International. Please refer to your Policy Terms for further information on the portfolio fund charges debited to the transaction account.

#### **Investment Options**

- 1. You can manage the investment yourself
- 2. Request that we appoint a Discretionary Asset Manager on a Discretionary basis
- 3. You can appoint a Fund Adviser on a Discretionary or Advisory basis

#### IMPORTANT

The option to request a Discretionary Asset Manager is only available where we have established legal agreements in place with the Discretionary Asset Manager. You must complete a form for each authorised custodian and fund adviser you wish to appoint and/or each Discretionary Asset Manager you wish us to appoint. Your Financial Adviser will be able to provide you with the relevant forms.

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<sup>\*\*</sup> SWIFT is an acronym for Society for Worldwide Interbank Financial Telecommunications.

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

#### Please detail the investment manager that you wish to appoint to manage the Assets at the authorised custodian(s).

DIEACE CELECT THE		PLEASE SELECT THE INVESTMENT MANAGER FOR EACH SELECTED CUSTODIAN					
PLEASE SELECT THE CUSTODIAN(S) THAT WILL HOLD THE ASSETS.	NAME OF CUSTODIAN	POLICYHOLDER	FUND ADVISER	DISCRETIONARY ASSET MANAGER			
Default custodian	Default						
Default custodian and one authorised	Default						
custodian							
One authorised custodian							
Two authorised	Lead						
custodians							
	Lead						
Three authorised custodians							

#### Transferring your premium and/or assets

You can send your premium via electronic bank transfer and/or Asset transfer. Please confirm below how much of your premium will be held with the custodian selected, if applicable, and how the premium will be sent.

	PREMIUM PAYMENT BE CURRENCY AND AMOL	ASSET TRANSFER (PLEASE STATE CURRENCY AND TOTAL VALUE OF		
ASSETS HELD BY	ELECTRONIC BANK TRANSFER	PAYMENT TO BE SENT TO	ASSETS) SEE NOTE 2 BELOW	
Default custodian		Default Custodian See note 2 below		
An authorised		Utmost International		
custodian		Authorised Custodian		
A second authorised		Utmost International		
custodian		Authorised Custodian		
A third authorised		Utmost International		
custodian		Authorised Custodian		

#### NOTES

- 1. A detailed list of any Assets to transfer must be supplied with the application and approved by Utmost International before any transfer takes place.
- 2. If you have selected the default custodian, electronic bank transfers and Asset transfers must be sent to Utmost International.
- 3. If you have selected to use an authorised custodian, Asset transfers must be sent direct to the authorised custodian.

#### SELECTED ASSETS TO INVEST WITH OUR DEFAULT CUSTODIAN

#### NOTE

Please note that you can invest in as many Assets as you wish, subject to a minimum investment into any one Asset of £2,500 (or currency equivalent) for Executive Investment Bond/Executive Redemption Bond and £1,250, (or currency equivalent) for Collective Investment Bond/Collective Redemption Bond. Some asset providers may have a higher minimum investment requirement and this minimum will prevail.

If we do not receive sufficient details, this will delay your investment.

ASSET IDENTIFIER/ ISIN	ASSET NAME	SHARE CLASS	BASE CURRENCY OF FUND	(WHOLE % NUMBERS ONLY)
				%
				%
				%
				%
				%
				%
				%
				%
				%
				%
				Total 100%
In case we need to o	larify the asset choice details above, please pr	rovide us with a cor	ntact name and tele	phone number.
Telephone number area code (daytime)		Telephone nun including area (evening)		
Fax number		E-mail address		

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#### G SOURCE OF FUND

#### 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 applicant(s) and NOT a third party.

If multiple payments are being received, please complete this section for each payment (further space available on following page).

- > Accounts within the UK, Jersey, Guernsey, Isle of Man or Gibraltar require a bank account number and sort code.
- > Premium payments made from banks outside the UK require a SWIFT or Bank Identifier Code (BIC), and an International bank account number (IBAN).
- > An ABA number is a code used for electronic payment to and from a US bank account.

#### Bank details 1

Payment currency	€	US\$	£	Other (s	tata curi	rency)		
Payment amount				Other (3	tate carr	icitey/		
r ayment amount								
Name as stated on bank account								
Sort code (If applicable)	-	-						
ABA number								
Branch code for non-UK banks								
Account number/IBAN								
SWIFT or BIC code (If applicable) Bank name								
Bank's full address								
	Country				Postcod	le		
How long have you held this account	yea	ars	months					
FURTHER PAYMENTS - IF	APPLICA	BLE						
Bank details 2								
Payment currency	€	US\$	£	Other (s	tate curi	rency)		
Payment amount								
Name as stated on bank account								
Sort code (If applicable)	-	-						
ABA number								
Branch code for non-UK banks								
Account number/IBAN								

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SWIFT or BIC code (If applicable)		
Bank name		
Bank's full address		
	Country	Postcode
How long have you held this account	years months	
Bank details 3		
Payment currency	€ US\$ £ O	ther (state currency)
Payment amount		
Name as stated on bank account		
Sort code (If applicable)		
ABA number		ch code for JK payments
Account number/IBAN		
SWIFT or BIC code (If applicable)		
Bank name		
Bank's full address		
	Country	Postcode
How long have you held this account	years months	

#### ACTIVITY WHICH GENERATED AMOUNT TO BE INVESTED

Utmost International is required to record details of how the funds being invested have been accumulated.

Where your funds come from more than one source, you should complete all relevant sections to give us the full picture of its origin.

#### Documentary evidence requirements:

If **all** of the following apply:

- you are resident in; and
- you are funding from; and
- your financial adviser is regulated in,

Isle of Man, Jersey, Guernsey, Hong Kong, United Kingdom, Singapore or Sweden, the threshold for requiring supporting documentary evidence is GBP 2,000,000.00 of total premiums paid to date to Utmost International.

Where the above doesn't apply, your financial adviser will tell you if additional documentary evidence is required by referring to our Source of Funds and Source of Wealth Guidelines (the Utmost International Isle of Man Limited version).

#### a. Accumulated Earned income (including salary, bonus and fees)

Total amount received	Currency	Amount
Number of years income accumulated Institution holding the funds	years	
Name of account where funds have been held Account number		
Length of time funds have been in this account Nature of business	years	months
Main occupation during the accumulation period (e.g. Director. If you have retired please include your occupation before retirement. Please check that the occupation is not on our list of prohibited documents as confirmed on our Source of Wealth and Source of Funds Guidelines  Main employer's name		
Employer's address	Postcode	
Average annual salary over the accumulation period Average annual bonus over the accumulation period	Currency Currency	Amount 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:

- > Last three month's payslips; **or**
- Three months of account statements showing declared income being credited; **or**
- Letter on headed paper from employer confirming last year's annualised earned income; and, where applicable, bonus payment or
- Tax statement e.g. P60 for the UK, IRAS for Singapore etc.; **or**
- Copy of latest accounts if selfemployed

## COLLECTIVE OR EXECUTIVE BOND APPLICATION FORM - NEW BUSINESS AND TOP-UP

#### b. Compensation

Name of organisation or individual that paid compensation Reason for compensation

Country compensation was awarded

Total amount received

Date of received

Currency	Amount
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 compensation validating the information in the application form

#### c. Competition win

Name of competition organiser

Description of competition

Country competition was held in

Total amount won

Date of win

Cur	renc	СУ		Amo	ount	:
		•				

#### 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 letterheaded 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

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#### d. Gift

u. u		If there are documentary
Full name of person who gave the gift Date of birth	d d m m y y y y	evidence requirements, as clarified at the start of this section, you are required to provide the following
Nationality		Original or suitably certified copies of <b>all</b> of the following:
Address	Postcode	<ul> <li>A valid identification documentation for the donor (even if it is not coming from their account); and</li> </ul>
Relationship to applicant		<ul> <li>Letter from the donor explaining the reason for the gift and source of funds behind the gift; and</li> </ul>
Reason for gift		Documentary evidence as to the
Description of gift		donor's source of wealth as set out in the Source of Funds and Source of Wealth Guidelines
Total amount received	Currency Amount	
Date received	d d m m y y y y	
e. Inheritance		If there are documentary
Deceased's full name		If there are documentary evidence requirements, as clarified at the start of this section, you are required to
Deceased's full name Relationship to applicant		evidence requirements, as clarified at the start of this section, you are required to provide the following
Deceased's full name	d d m m y y y y	evidence requirements, as clarified at the start of this section, you are required to
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance		evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets	d d m m y y y y  Currency Amount	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
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)		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
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)  Amount received  Date received  Solicitor/lawyer's (who dealt	Currency Amount	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-
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)  Amount received  Date received	Currency Amount	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
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)  Amount received  Date received  Solicitor/lawyer's (who dealt with the estate) name	Currency Amount	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 letterheaded paper confirming the information supplied in this
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)  Amount received  Date received  Solicitor/lawyer's (who dealt with the estate) name Solicitor/lawyer's firm name	Currency Amount	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 letterheaded paper confirming the information supplied in this
Deceased's full name  Relationship to applicant  Date of death  Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)  Amount received  Date received  Solicitor/lawyer's (who dealt with the estate) name Solicitor/lawyer's firm name	Currency Amount	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 letterheaded paper confirming the information supplied in this

f. Loan		
Name of loan provider  Address of loan provider		If there are documentary evidence requirements, as clarified at the start of this section, you are required to
Address of loan provider		provide the following
		Original or suitably certified copy of <b>one</b> of the following:
	Postcode	A signed letter from the lender on letter-headed
Total amount borrowed  Date of loan	Currency Amount	paper confirming the name of borrower, amount of loan and date of draw-down; <b>or</b> ,
Date of loan	d d m m y y y y	A loan statement confirming the details provided in this form
g. Maturing policy/policy	claim/replacement policy	If there are documentary
If the source of funds is the sale please complete h instead.	of an investment rather than maturity,	evidence requirements, as clarified at the start of this section, you are required to
Name of policy provider		provide the following
Address of policy provider		Original or suitably certified copy of <b>one</b> of the following:
	Postcode	Detter on company headed paper from previous product provider regarding notification of proceeds of claim under the policy; <b>or</b>
Policyholder's full name		Closing statement from
		previous product provider
Length of time policy held	years months	
we need to understand the Sc	sold has been owned for less than 5 years, urce of Funds immediately prior to the purchase se complete an additional relevant section to	
Reason for policy claim or replacement policy (if applicable)		
Total amount received	Currency Amount	
Surrender penalty (if applicable)		
Date received	d d m m y y y y	

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#### h. Sale of asset portfolio or investment

Description of asset portfolio

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

or investment (i.e. government bonds, equities etc.)	
Name of the company that held it	
Registered address of company	Postcode
Account name	
Length of time asset portfolio or investment held	years months
we need to understand the So of the portfolio/investment. Pl confirm this.	ng sold has been owned for less than 5 years, ource of Funds immediately prior to the purchase ease complete an additional relevant section to
Date of sale	d d m m y y y y
Net amount received	Currency Amount
i. Sale of interest in compa	any
Company name	
Business sector	
Address of company	

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

i. Sale of interest in compa	any			
Company name				
Business sector				
Address of company				
	Postcode			
Your connection with the company For example: owner, partner or shareholder				
Date of sale	d d m	m y y	/ у у	
Sale amount	Currency		Amount	
Net amount received The amount you have received after any deductions such as fees and taxes.	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 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,
- Dopy 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
understand the Source of Fun	been owned for less than 5 years, we need to ds immediately prior to the purchase of the 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 antimoney laundering regulation, for example a regulated accountant or lawyer

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H REGULAR WITHDRA	WALS								
NOTE  Minimum amount for regular	withdrawals is £5	00/\$750/€	750 (or cui	rrency equ	uivalent) re	egardle	ess of free	quency.	
WITHDRAWAL AMOUNT									
Total amount to be withdrawn ea	ch year								
or									
Percentage of premium to be wit Payment currency	hdrawn each yea €	r US\$	£	Other (sta	te currenc	cy)			%
Withdrawal frequency (✔)	Monthly	Ever	y 2 months	5	Quarterly		Half-ye	arly	Yearly
NOTE  What about tax?  We strongly suggest you con order to make sure that this is consequence.									าy tax
Date of first payment (If your Policy has not been accept made on the next payment date				rst payme	nt will be	d	d m	m y	у у у
PAYEE DETAILS									
We will only pay withdrawals to p	oolicyholders and	will not ma	ake payme	nts to third	d parties.				
Would you like your withdrawals 'Source of Funds'?	to be made to th	e same bar	nk account	detailed i	n Section	G		Yes	No
If 'No' please complete the section	on below.								
If 'Yes' and you have entered mo Funds' section, which details sha		f bank acco	ount details	s in the 'So	ource of		1	2	3
Until further notice, I/we would li	ke regular withdr	awals to be	made to:						
Name as stated on bank account Bank account number/IBAN									
Sort code (applicable to UK accounts) ABA number	-	-	Branch c payment	ode for no	on-UK				
SWIFT or BIC code	-	-	ABA nun	nber					
(SWIFT code needed for bank ac (An ABA number is a code used						counts	with an	IBAN)	

## COLLECTIVE OR EXECUTIVE BOND APPLICATION FORM - NEW BUSINESS AND TOP-UP

Bank name		
Bank address		
	Country	Postcode
NOMINATED ACCETICS		
NOMINATED ASSET(S)		
Please state which asset(s) listed it only apply where you have not ch	in Section F is/are to be used as the Nominated Anosen an authorised custodian.	Asset to pay regular withdrawals. This will
NOTE		
	fficient balance in your Nominated Asset to cover re unable to pay any withdrawals or fees if there i	
If there are any further Nominated form and tick here	d Assets, please photocopy this page, attach the	details with this application
ISIN/ SEDOL	Name	Percentage %
ISIN/	Name Name	Percentage %
SEDOL ISIN/	Name Name	Percentage %
SEDOL ISIN/	Name	Percentage %
SEDOL ISIN/	Name	Percentage
SEDOL		%
	ES - NEW CONTRACTS ONLY	
Number of policies you would lik	e	
NOTE		
No more than 9,999 policies a	are available.	
If you do not specify the numb	ber of policies, we will issue 12.	
The amount of policies canno	t change after your bond is live.	
The minimum investment amo maximum number of policies	ount for each individual policy is £500, US\$750 or available is 50.	r €750. If the investment is £25,000, the
J DECLARATIONS AN	D APPLICATION	
If there are more than two application form and tick here (	cants, please photocopy all of this section, attach	the details with this
NOTE		
NOTE  If additional pages are added	l, each separate page must be initialled by all app	olicants.

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#### 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 (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;
- ompile statistical analysis or market research, where information is not specific to the individual;
- ocomply 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 <a href="https://www.utmostinternational.com/privacy-statements/">www.utmostinternational.com/privacy-statements/</a>

If I have any questions about data privacy I can address these to:

For Utmost PanEurope: The Data Protection Officer, Utmost PanEurope, 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: The Ireland Data Protection Commissioner, Canal House, Station Road, Portarlington, 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 declarations carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Collective Investment Bond, Collective Redemption Bond, Executive Investment Bond or Executive Redemption Bond. 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 we can assess its possible significance. If you become aware of such a fact while we are considering your application, you should notify us immediately.

You should satisfy yourself that you are able to effect the proposed contract under any taxation, exchange control or insurance law to which you may be subject. 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 FOR THE APPLICATION OF THE BOND

A copy of this completed application form is available on request.

Utmost International Isle of Man Limited will be referred to as Utmost International throughout this declaration.

- 1. I understand that Utmost International has designated the Policy as suitable only for Professional Investors as defined by Utmost International in the Policy terms and conditions.
- 2. I confirm that I meet the definition of a Professional Investor. I understand that Utmost International do not have any details of my circumstances or characteristics, will not undertake any investigations as to whether I meet this definition, and will rely solely on my confirmation, as part of their application acceptance criteria, that I meet the definition of a Professional Investor. I understand that Utmost International will not undertake any investigation that I meet the definition of a Professional Investor.
- 3. I understand that the Policy allows investment into various types of Assets and some of these Assets are only suitable for Professional Investors. I 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 a 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. I understand that I should read the offering documents for Assets suitable for Professional Investors.
- 5. I understand that if I consider myself to be a Retail Investor in the future, Utmost International will not restrict the choice of Assets available under the Policy. I also understand that it will be my responsibility to:
  - a. only choose Assets which are suitable for Retail Investors; or
  - b. to inform the Fund Adviser that I am now a Retail Investor; or
  - c. to complete a new Investment Mandate and send this to Utmost International where a Discretionary Asset Manager has been appointed.

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- 6. For individual applicants only. I understand that I will have an Online Service Account set up, should I wish to activate it. If I do activate my Online Service Account, whilst I am submitting this application through my Financial Adviser to your Office, I agree that:
  - a. I will apply for and sign onto my Online Service Account, ensuring that my online access sign in details will be kept secure and not shared with anyone else; and
  - b. all Policy Transactions will be made by me using my Online Service Account where the Online Service allows, unless I have requested otherwise; and
  - c. all communications from you will be through my Online Service Account where the Online Service allows, unless I have requested otherwise.
- 7. I understand and agree that I am applying to enter into a new contract (or a top up to an existing contract) with Utmost International, it will be subject to the laws of the Isle of Man and the Policy Terms will be in the English language.
- 8. a. If a bond number is not shown in section A of this form, I request that the amount shown in section E be invested as an initial premium for policies comprising an Utmost International Collective Bond or Executive Bond, and request Utmost International to issue the policies in my/company/corporate trustee name, and jointly with the other applicants, if any; or
  - b. I request that the amount shown in section E be invested as an additional premium for the policies currently in force bearing policy numbers consisting of the bond number, as shown in section A of this form.
- 9. I declare to the best of my knowledge and belief that the statements made in this application, and any related documents, are true and complete. I have not concealed a material fact. I agree to provide Utmost International with any further information in respect of this application on request.
- 10. I confirm that Utmost International has not provided any investment advice and I or my fund adviser are responsible for the selection of Assets to be linked to my Portfolio Fund. I acknowledge that Utmost International is not responsible for any loss suffered or reduction in the value of my Policy arising from my investment. Utmost International does not have any responsibility for the management of the underlying Assets chosen other than Internal Funds, which are invested in accordance with the criteria as published in the relevant fund factsheet and carrying out a treasury function in respect of the Transaction Account and Utmost International does not recommend any Asset as a suitable investment.
- 11. I confirm that I am not a resident, in, nor is the company/the corporate trustee incorporated in the United States of America or any of its territories. If I become resident or the company/the corporate trustee becomes incorporated in the United States of America or any of its territories, Utmost International may not be able to accept any further premiums until after I cease to be a resident or the corporate/the corporate trustee ceases to be incorporated in the United States of America or any of its territories.
- 12. I confirm that I have received a copy of the Policy terms 'Details of your Collective Investment Bond' (ref CIB4), 'Details of your Collective Redemption Bond' (ref CRB5), 'Details of your Executive Investment Bond' (ref EIB4), or 'Details of your Executive Redemption Bond' (ref ERB4), the Collective Bond brochure entitled 'Perfectly tuned investments' or the Executive Bond brochure entitled 'The discerning investor', the "Collective Investment Bond at a glance', 'Collective Redemption Bond at a glance', 'Executive Investment Bond at a glance', or 'Executive Redemption Bond at a glance' and I have had the opportunity to read them before reviewing and signing this application.
- 13. I am aware of the charges payable on the Collective or Executive Bond, including the charges payable in respect of the Assets which may be held within it. I understand that 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 my Financial Adviser. These payments could be in addition to any commission payable by the Asset provider to the Financial Adviser in respect of the Assets held. I understand that Utmost International may receive payments in the form of fund manager rebates, from an Asset provider in respect of the Assets held, and which Utmost International may share with my Financial Adviser.
- 14. I authorise and request Utmost International to effect the Regular Withdrawals detailed in section H and confirm that such payments will discharge Utmost International from all liabilities and claims arising from those regular withdrawals. I understand that this authority supersedes any authority previously given.
- 15. I understand that in cases where the Asset(s) I have selected is/are not redeemable for a certain period of time, Utmost International may not be able to return that part of my payment until the end of that period. The description of the funds and/or Assets I have chosen will give details if this applies. I may invest immediately into non-daily dealing funds with the understanding that in the event of cancellation or requiring early access that:
  - a. I may not get my money back immediately and payment may be delayed for some time;
  - b. the institution may impose penalties and therefore I may get back less than I invested, and/or
  - c. the only way in which to receive value may be through a transfer of the ownership of that Asset into the name of the Policyholder.

- 16. I appoint the Financial Adviser to act on my behalf in accordance with the Policy Terms.
- 17. Where applicable, I confirm that each life assured (or their parent where parental consent is required) consents to this application, and agrees to my acting as their agent for the purpose of the information provided in this application.
- 18. The premium detailed in this application and any other premium tendered in respect of this application are derived solely from the source of funding provided and have, where required, been declared to the relevant tax authority in my country of residence for taxation.
- 19. The application for an Utmost International policy is not being made for the purpose of concealing funds, Assets or wealth with a view to the evasion of any taxes I am obliged to pay.
- 20. I have read and understood the Data Privacy Statement set out in this section and will make it available to other individuals whose Personal Data has been provided to Utmost International either in this application or within accompanying documentation.

#### For individual investors. I declare:

- 21. I am resident for taxation only in the country or countries shown in section B1 and am not resident for taxation elsewhere.
- 22. I am a national/citizen of the country (or countries in the case of dual nationality/citizenship) detailed in this application and am not a national or citizen of any other country.

#### Appointment of a Lead Policyholder - applicable if there is more than one applicant

- 23. I agree to the appointment of the Lead Policyholder, who is named in this application, for the policies comprising our Utmost International Collective Investment Bond, Collective Redemption Bond, Executive Investment Bond or Executive Redemption Bond in accordance with the Policy Terms.
- 24. I understand that this appointment is revocable and can be changed at any time (as explained in the Policy Terms).
- 25. I understand that by agreeing to the appointment of the Lead Policyholder I authorise the Lead Policyholder to provide Utmost International with instructions to carry out and request certain Policy Transactions on behalf of all Policyholders. The instruction or request shall be deemed to have been addressed, sent and authorised on behalf of all Policyholders.
- 26. I understand that these instructions will be legally binding and that Utmost International can act on instructions received from the Lead Policyholder.

#### Additional declarations applicable to Corporate applicants:

- 27. I confirm that the Company has not been, or is not in the process of being dissolved, struck off, wound up or terminated.
- 28. The Company confirm that the Company shares are not held in bearer form and will not be converted to bearer share form.
- 29. I confirm that investment into the Bond is within the investment powers available to the directors of the Company.

#### Additional declarations applicable to trust applicants, including trust companies:

- 30. I confirm that the Trust Company has not been, or is not in the process of being dissolved, struck off, wound up or terminated.
- 31. I confirm that investment into the Utmost International Collective or Executive Bond is within the investment powers available to the trustees of the trust.

#### Additional declarations applicable to application introduced by a Financial Adviser in Hong Kong

- 32. I understand that the policy (subject to the review and acceptance of this application by Utmost International) will be issued directly by the Isle of Man office of Utmost International.
- 33. I understand that the product concerned with this application is not a Hong Kong relevant product as promoted to the local market by the Hong Kong office of Utmost International.
- 34. I understand that as the policy will not constitute a Hong Kong relevant business, the Hong Kong requirements will be inapplicable to the policy. I am aware that the policy will be solely subject to the Isle of Man requirements as stipulated by the Isle of Man Financial Services Authority.

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Please enter the country in whice application form was completed			
This application must be comple	ted by the applicant(s) unless you have asl	ked your financial adviser to complete it.	
Did you complete this application	on form yourself? (✓)	Yes	No
If No, did a third party, such as y	our financial adviser, complete it on you	r behalf? (✓) Yes	No
	ction J of the application, you confirm that on your behalf, that all the information pro	you have read them and, if a third party has vided in it is correct.	i
SIGNATURE	Applicant 1/Trustee 1/Authorised Signatory 1	Applicant 2/Trustee 2/Authorised Signatory 2	
Date	d d m m y y y y		
Further copies of the Policy Term	s and/or this completed application form a	are available on request.	

#### FINANCIAL CRIME - RISK RAITNO

#### FOR ALL APPLICANTS - TO BE COMPLETED BY YOUR FINANCIAL ADVISER

#### NOTE

Please refer to the Source of Funds and Source of Wealth Guidelines (available from the literature library at www.utmostinternational.com) for information on how to complete the table below.

To prevent financial crime, Isle of Man authorised life companies may adopt a 'risk-based approach' when obtaining evidence of the source of a client's funds. In order to speed up the application process we have provided you with the table below to allow you to determine an indication of your client's risk rating before submitting the application form to us. We highly recommend that you complete the risk rating as it allows you to determine if you need to enclose further documentary evidence with the application form or not. If we do not receive the necessary documentary evidence with the application form, then it will take longer to process the business.

In order to decide what risk rating applies to your client's investment you need to take into account the following factors:

- a. your client's country of residence
- b. which country the premium is paid from
- (a) + (b) = total risk rating

APPLICANT	CLIENT COUNTRY OF RESIDENCE (A)	COUNTRY OF PREMIUM FUNDING (B)	TOTAL RISK RATING

Utmost PanEurope reserves the right to request further documentation if it is felt appropriate. Please note that each new application, or application for an additional investment, will be treated individually.

If you are unsure about a particular application, please contact your Utmost International sales consultant in the first instance, or alternatively contact Utmost International's Sales Support team directly on +44 (0)1624 655010.

#### L

#### VERIFICATION OF CUSTOMER IDENTITY

Please send the following supporting documentation with your signed and completed application.

#### Verification of identity of individuals

We require one document from part A and one from part B. If neither document in part A is available, please provide two formal documents showing appropriate personal details and verifiable reference numbers from part B. Identification documentation must be current and valid. Evidence of address should be the latest available, but no more than six months old.

#### VERIFICATION OF CUSTOMER IDENTITY - FOR INDIVIDUAL INVESTORS

Please note we will not be able to issue your policy until the necessary identification documents have been provided.

We require one document from Part A and one from Part B below.

#### PART A - Individual whose identity is being verified

Valid in-date Passport

National ID card

#### PART B - Individual whose residential address is being verified

These must be less than six months old:

- A recent utility bill (electricity, gas, water), rates or council tax bill (excluding mobile/cell phone bills)
- A bank, mortgage or credit card statement (excluding store cards)
- > An extract from the official register of electors
- > State pension, benefit or other government produced document showing benefit entitlement
- A recent tax assessment document
- > Proof of ownership or rental of the residential address

#### DOCUMENT CERTIFICATION

Certification must state "I hereby confirm that this document is a true copy of the original which I have sighted and the photograph represents a good likeness of the client" and include the date of certification, the certifier's full name, signature and job title.

#### FURTHER DOCUMENTARY EVIDENCE

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)	

#### NOTE

Please note that we will not be able to commence the policy until this section has been completed and you have provided the necessary identification documentation.

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Outlined below are the standard minimum requirements. In some circumstances we may need additional information.

In	dividual trustees				Enclosed (✓)	
1.	1. Verification of the identity and address of all individual trustees - please refer to parts A and B above for the necessary identification documents.					
2.	2. Verification of the identity and address of the protector (where appropriate).					
3.	Evidence of the appointment of trustees (for example a certified copy of an extract from the trust deed, but not the whole deed) if the application is in respect of an existing trust.					
4.	The trustees (settlor(s) where paddress and date of birth or dependiciaries. If the beneficiaring grandchildren. Please continu	eath for all the parties to the ies are not named you mus	ne trust, for examplest provide the class	e settlor/donor, protector,		
Ca	pacity	Settlor/Donor	Protector	Beneficiary		
Na	ame					
Da	ate of birth or death	d d m m y y y	y Birth	Death		
Re	sidential address					
		Country		Postcode		
Ca	pacity	Settlor/Donor	Protector	Beneficiary		
Na	ame					
Da	ate of birth or death	d d m m y y y	y Birth	Death		
Re	sidential address					
		Country		Postcode		
_			_	- 0.		
	pacity	Settlor/Donor	Protector	Beneficiary		
Ná	ame					
Da	ate of birth or death	d d m m y y	y Birth	Death		
Re	sidential address					
		Country		Postcode		
Ca	pacity	Settlor/Donor	Protector	Beneficiary		

## COLLECTIVE OR EXECUTIVE BOND APPLICATION FORM - NEW BUSINESS AND TOP-UP

Name		
Date of birth or death	d d m m y y y y Birth	Death
Residential address		
	Country	Postcode
Class of beneficiary if not name	d (an extract of the deed may be provided)	

You may also wish to provide identification documentation at the time of application/assignment for the named parties to the trust in order to avoid delays on subsequent transactions where documentary evidence is required, e.g. for beneficiaries.

#### Corporate and corporate trustees

Enclosed (✓)

- 1. A list of directors' names.
- 2. Verification of the identity of at least two directors, one of whom must be an executive director.
- 3. A list of authorised signatories, specimen signatures and evidence of their signing power(s).
- 4. The corporate or corporate trustee's Certificate of Incorporation or other official registration document.
- 5. Evidence of the registered office of the corporate or corporate trustee.
- 6. Trading company a copy of the latest annual reports and accounts. Non-trading company evidence of the origin of wealth.
- 7. Private limited companies verification of the identity of all shareholders holding 25% or more of the issued share capital as at the date of application. Where the shareholders are not individuals we will require verification of the identity of the ultimate beneficial owner of those entities and their relationship to the company.

All information should be provided on letterhead.

#### Confidentiality

Any information given by the client(s) or their Financial Adviser will be used solely by members of the Utmost Group of companies.

#### NOTE

Please tick ( ) to indicate the identification you have supplied for each individual party to the bond. If a fund adviser has been appointed we may need to verify the identity of the appointee.

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#### PART A REASON WHY DOCUMENTS ARE NOT PROVIDED (IF APPLICABLE)

РΑ	PART A INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED			
1.	Name			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			
2.	Name			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			
3.	Name			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			
4.	Name			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			

#### PART B INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED

#### These must be less than six months old 1 2 3

4

- 1. A recent utility, rates or council tax bill (mobile/cell phone bills not acceptable)
- 2. A recent mortgage statement, giving the residential address
- 3. An extract from the official register of electors
- 4. A state pension, benefit or other government produced document showing benefit entitlement
- 5. A recent tax assessment document
- 6. A recent account statement from bank or credit card (store cards not acceptable)
- 7. Proof of ownership or rental of the residential address

#### M

#### FINANCIAL ADVISER/SUITABLE CERTIFIER 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.

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#### 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.

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
Regulatory body authorisation number (if applicable)	
Regulator name	
Utmost International financial adviser account number	
	Financial Adviser
SIGNATURE	
Full name of financial adviser	
Date	d d m m a a a a
Financial Adviser stamp	

## A WEALTH Of DIFFERENCE

www.utmostinternational.com

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

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.

Tel: +44 (0)1624 655 555 Fax: +44 (0)1624 611 715. Licensed by the Isle of Man Financial Services Authority.

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