

COLLECTIVE OR EXECUTIVE BOND

APPLICATION FORM - NEW BUSINESS AND TOP-UP

For individual, corporate and trustee investors

Utmost Wealth Solutions is a brand name used by a number of Utmost companies. This item has been issued by Utmost International Isle of Man Limited.

THIS DOCUMENT WAS LAST UPDATED IN JULY 2025.

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.

SECTION	PAGE	COMPLETED
A Type of application	4	<input type="checkbox"/>
B1 Details of the applicant(s)/trustee(s)	7	<input type="checkbox"/>
B2 Corporate/corporate trustee applicant	9	<input type="checkbox"/>
B3 Details of the trust (if applicable)	10	<input type="checkbox"/>
B4 Politically exposed person	11	<input type="checkbox"/>
B5 Existing contracts	11	<input type="checkbox"/>
C Details of the life/lives assured	12	<input type="checkbox"/>
D Utmost International Isle of Man Limited Charges	12	<input type="checkbox"/>
E Investment details	13	<input type="checkbox"/>
F How the bond assets are invested and managed	14	<input type="checkbox"/>
G Source of funds	17	<input type="checkbox"/>
H Regular withdrawals	24	<input type="checkbox"/>
I Number of policies - new contracts only	25	<input type="checkbox"/>
J Declarations and application	25	<input type="checkbox"/>
K Financial Crime - Risk Rating	30	<input type="checkbox"/>
L Verification of customer identity	31	<input type="checkbox"/>
M Customer due diligence (CDD) requirements and financial adviser declaration	35	<input type="checkbox"/>

FINANCIAL ADVISER DETAILS

Utmost International Isle of Man Limited account number	<input type="text"/>
Adviser company name	<input type="text"/>
Name of Financial Adviser	<input type="text"/>
Adviser company address	<input type="text"/>
	<input type="text"/>
Telephone number	<input type="text"/>
E-mail address	<input type="text"/>

Utmost International Isle of Man Limited only accepts business introduced by Financial Adviser companies which have Terms of Business with us.

NOTES - BEFORE YOU COMPLETE YOUR APPLICATION

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 Isle of Man Limited. You are responsible for their actions or omissions.

All references to **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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 (✓)

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:

- › 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 Isle of Man Limited 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 Isle of Man Limited promptly so we can determine if a new self-certification is required.

A TYPE OF APPLICATION

TYPE OF APPLICATION

Type of client (✓)	Individual	Joint	Corporate/Corporate Trustee	Trustee
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If this is an application for a NEW BOND, please indicate which type of bond you are applying for: (✓)

Life assurance - Collective Investment Bond	Capital redemption - Collective Redemption Bond
Life assurance - Executive Investment Bond	Capital redemption - Executive Redemption Bond

NATURE AND PURPOSE OF INVESTMENT

IMPORTANT NOTE

The responses provided below are required to meet our obligations under applicable anti-money laundering and countering the financing of terrorism regulations.

Please note that it is your responsibility, after taking any necessary legal or tax advice, from external professional parties such as your appointed financial adviser, to ensure that the product is a suitable investment and remains suitable based on your needs, objectives and risk appetite.

1 What is the investment purpose of selecting this Utmost policy?

Please select which options apply:

- Medium to Long Term Investment to produce 'income' stream in the form of capital withdrawals
- Medium to Long Term Investment for capital growth
- Medium to Long Term Investment to produce a capital sum for retirement
- Consolidation of financial assets into one product
- Estate and succession planning to pass wealth to next generation
- Estate tax and death duties mitigation
- Other

2 What influenced your decision to invest in the Isle of Man rather than your country of residence?

Please select which options apply:

- Strong regulatory framework overseeing financial services business
- Investor protection
- Long history of economic stability
- Political autonomy and legislative freedom
- Skilled financial services workforce
- Favourable tax environment
- Other

3 How many years do you anticipate holding the Utmost policy?

- 1 to 5 years
- 6 to 10 years
- 11 to 15 years
- 16 to 20 years
- 20+ years
- Unknown at present

4 How many additional premiums do you anticipate making into the policy each year?

- 0
- 1 to 2
- 3 to 4
- 5+
- Unknown at present

5 What percentage of the value of the policy do you expect to withdraw each year?

- 0%
- 1 - 5%
- 6 - 10%
- 11 - 20%
- 20+%
- Unknown at present

6 Do you intend to transfer the policy to another party at some future point? If so, what is their relationship to you? Please select which options apply:

Not planning to transfer

Spouse

Children

Grandchildren

Parent

Business associate/partner

Other

Unknown at present

7 Do you intend to use the policy for collateral for a loan at any point?

Yes

No

Unknown at present

If "Yes", please indicate the purpose of the loan

8 Do you have plans to relocate to, or work in, another country?

Yes

No

Unknown at present

If "Yes", please indicate the country

POLICY CURRENCY

I wish my policy to be valued in (✓) € US\$ £ Other (state currency)

Please note if no currency is entered your policy currency will be pound sterling (£). THE POLICY CURRENCY CANNOT BE CHANGED AFTER THE POLICY IS SET UP.

ADDITIONAL INVESTMENT

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

NOTE

Unless your details have changed, you only need to complete the full forename(s) and surname of each policyholder and life assured (if applicable) in section B1 if you are an individual applicant/trustee, or the name of the company in B2 if you are a corporate applicant, and C. The other relevant sections 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 (✓)

NOTE

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

	Applicant/Trustee 1	Applicant/Trustee 2 (if any)																
Title (✓)	Mr Mrs Miss Other <input style="width: 150px;" type="text"/>	Mr Mrs Miss Other <input style="width: 150px;" type="text"/>																
Forename	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Middle name(s)	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Last name	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Maiden name, previous name or alias	Yes No	Yes No																
If "Yes", provide other name(s)	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Sex (✓)	Male Female	Male Female																
Date of birth	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">d</td> <td style="width: 20px; text-align: center;">d</td> <td style="width: 20px; text-align: center;">m</td> <td style="width: 20px; text-align: center;">m</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">d</td> <td style="width: 20px; text-align: center;">d</td> <td style="width: 20px; text-align: center;">m</td> <td style="width: 20px; text-align: center;">m</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> <td style="width: 20px; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y											
d	d	m	m	y	y	y	y											
Nationality	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Dual nationality (if applicable)	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Passport number/national identity card number	<input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/>																
Residential/home address (Where you are currently living. We do not accept c/o and PO Box addresses)	<input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/>																
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Country	Postcode																	
Country	Postcode																	
Correspondence address (If left blank we will use your residential address for correspondence)	<input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/>	<input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/> <input style="width: 250px;" type="text"/>																
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Country	Postcode																	
Country	Postcode																	

Utmost International Isle of Man Limited accepts no responsibility for the consequences of sending documentation to this correspondence address, or to an address notified subsequently. Utmost International Isle of Man Limited reserves the right to send correspondence to your residential address where regulations prevent it being sent to any other address.

We can only accept one correspondence address for the bond and will default to Applicant/Trustee 1 residential address if this is blank.

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

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)		

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	Employed	Self Employed																
	Retired	Not employed	Retired	Not employed																
Date of retirement/ unemployment (if applicable)	<table border="1" style="font-size: 8px; width: 100%; height: 15px;"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y		<table border="1" style="font-size: 8px; width: 100%; height: 15px;"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y	
d	d	m	m	y	y	y	y													
d	d	m	m	y	y	y	y													
Company name																				
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\$																	
	Other (state currency) <input style="width: 50px;" type="text"/>		Other (state currency) <input style="width: 50px;" type="text"/>																	
Last year's bonus																				
Bonus currency	€	£	US\$																	
	Other (state currency) <input style="width: 50px;" type="text"/>		Other (state currency) <input style="width: 50px;" type="text"/>																	
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 FOR THE ONLINE SERVICE ACCOUNT

If there is more than one applicant then each applicant must select one applicant to be the Lead Policyholder. Each applicant must agree to select the same Lead Policyholder.

We, the applicants, appoint (insert name in the box) to act as the Lead Policyholder for the policies comprising our Collective/Executive Bond in accordance with the Policy Terms.

The specific e-mail address which will be used for the Online Service Account is
(Please note each client must have a unique email address. An email address cannot be shared by users on Wealth Interactive.)

B2 CORPORATE/CORPORATE TRUSTEE APPLICANT

In this section, please give details of the corporate applicant.

CORPORATE/CORPORATE TRUSTEE APPLICANT

Please tick (✓)	Private company	Public company	Other <input style="width: 40px; height: 20px;" type="text"/>
Corporate name	<input style="width: 100%; height: 25px;" type="text"/>		
Contact person	<input style="width: 100%; height: 25px;" type="text"/>		
Country of registration	<input style="width: 100%; height: 25px;" type="text"/>		
Date of incorporation	<input style="width: 100%; height: 25px;" type="text"/>		
Registered office address (This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses)	<input style="width: 100%; height: 25px;" type="text"/>		
	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 30%; height: 25px;" type="text"/>	
Correspondence address (If left blank we will use the residential address for correspondence)	<input style="width: 100%; height: 25px;" type="text"/>		
	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 30%; height: 25px;" type="text"/>	

Utmost International Isle of Man Limited accepts no responsibility for the consequences of sending documentation to this correspondence address, or to an address notified subsequently. Utmost International Isle of Man Limited reserves the right to send correspondence to your residential address where regulations prevent it being sent 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)	<input style="width: 95%; height: 25px;" type="text"/>
E-mail address	<input style="width: 95%; height: 25px;" type="text"/>
Corporate website address	<input style="width: 95%; height: 25px;" type="text"/>
Please explain the company's main business (for example manufacturing or trading company)	<input style="width: 95%; height: 50px;" type="text"/>

AUTHORISED SIGNATORIES

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

NOTE

The company directors/authorised signatories of the company must complete and sign the declaration in section J. Additional documents are needed to evidence the identity of at least two directors, one of whom must be an executive director of the company. If there is only a sole director we will require evidence of identity for this individual and at least one other authorised signatory.

B3 DETAILS OF THE TRUST (IF APPLICABLE)

TRUST DETAILS

In this section, please give the following details: the name of the trust (for example, 'the Mary Jones Policy Trust dated 1 April 1990', 'the John Brown Will Trust') and the date the trust was created on.

The trust name is:

The trust was created on:

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

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 ASSOCIATED PARTY DETAILS

This section only applies to applications completed by Trustees acting on behalf of a Trust.

SETTLOR DETAILS

Details of the Settlers of the trust and any other persons who have provided funds to the trust must be supplied.

You will need to provide suitable verification of their identity and residential address at Section L.

	Settlor 1	Settlor 2																
1 Role																		
2 Title (Mr, Mrs, Ms, etc.)	<input type="text"/>	<input type="text"/>																
3 Gender	<input type="text"/>	<input type="text"/>																
4 First Name(s)	<input type="text"/>	<input type="text"/>																
5 Surname(s)	<input type="text"/>	<input type="text"/>																
6 Date of birth	<table border="1"><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>	d	d	m	m	y	y	y	y	<table border="1"><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y											
d	d	m	m	y	y	y	y											
7 Place of birth	<input type="text"/>	<input type="text"/>																
8 Please list all nationalities/citizenships held (if applicable)	<input type="text"/>	<input type="text"/>																

Have you held a previous nationality?

Yes

No

Yes

No

If yes, provide details

9 Permanent residential address (PO Box and 'care of' addresses are not acceptable)

Postcode

10 If deceased, date of death

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

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

TRUST ASSETS

Please provide an indication of the total value of the trust's assets

Currency (✓)

€

US\$

£

Other (state currency)

Country

B 4 POLITICALLY EXPOSED PERSON

We are required to identify persons associated with this application who could be classed as a Politically Exposed Person ("PEP"). A PEP is a term used to describe someone who is currently, or has previously been, entrusted with prominent public functions or responsibilities. For example: a Head of State, a holder of a senior political or government post, a senior member of the Judiciary or the Military, a senior employee of a State Owned Corporation, or a board member of a Central Bank. Immediate family members or close associates of a PEP should be considered a PEP in their own right.

Is there anyone associated with this application who could be considered a PEP?

Yes

No

If "Yes", please provide details

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 Isle of Man Limited 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.

B 5 EXISTING CONTRACTS

Please provide details of any existing Utmost International Isle of Man Limited contracts you have or are making payments to (if applicable).

Type of contract

Type of contract

Policy number

Policy number

All applicants must complete and sign the declaration in Section J.

C DETAILS OF THE LIFE/LIVES ASSURED

NOTE

Do not complete this section if you have selected capital redemption in section A as there are no lives assured on a capital redemption bond and we will not record the details if you fill in this section in error.

Minimum age for life assured is three months and maximum age is 89 years.

Is the applicant(s) also going to be a life assured? Tick if yes (✓)

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 (✓)

	First/additional life assured (if any)	Second/additional life assured (if any)
Title (✓)	Mr Mrs Miss Other <input type="text"/>	Mr Mrs Miss Other <input type="text"/>
Forename	<input type="text"/>	<input type="text"/>
Middle name(s)	<input type="text"/>	<input type="text"/>
Last name	<input type="text"/>	<input type="text"/>
Maiden name, previous name or alias	Yes No	Yes No
If "Yes", provide other name(s)	<input type="text"/>	<input type="text"/>
Gender (✓)	Male Female	Male Female
Date of birth	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Nationality	<input type="text"/>	<input type="text"/>
Dual nationality (if applicable)	<input type="text"/>	<input type="text"/>
Residential/home address (Where you are currently living. We do not accept c/o and PO Box addresses)	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	Country <input type="text"/> Postcode <input type="text"/>	Country <input type="text"/> Postcode <input type="text"/>
Relationship of life assured to applicant	<input type="text"/>	<input type="text"/>

D UTMOST INTERNATIONAL ISLE OF MAN LIMITED 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 INTERNATIONAL ISLE OF MAN LIMITED'S CHARGES

Please enter the code for the Utmost International Isle of Man Limited charge package that your Financial Adviser has explained will apply to your Bond. The appropriate Utmost International Isle of Man Limited charging code should be used. Failure to provide the right code could result in the incorrect package being applied and/or delays.

--	--	--	--	--	--	--	--	--	--

Please enter Allocation Percentage for this bond (if applicable)

%

Please enter the Ongoing Service Charge (if applicable)

%

E INVESTMENT DETAILS

PREMIUM PAYMENT

Amount to be invested (in policy currency)

--	--	--	--	--	--	--	--	--	--

Payment method (✓)

Electronic bank transfer

Cheque

Asset transfer

NOTE

The premium payment must come from an account held in the name of the applicant(s).

The minimum initial investment amount for the Collective Bond is £25,000 (US\$37,500, €37 500[†]) and the minimum additional investment is £2,500 (US\$3,750, €3 750[†]).

The minimum initial investment amount for the Executive Bond is £50,000 (US\$75,000, €75 000[†]) and the minimum additional investment is £2,500 (US\$3,750, €3 750[†]).

Please enclose your copy of receipt of your electronic bank transfer payment and your 'Transferring Assets to your bond/account' form with this application form.

[†]or other currency equivalent

STERLING PAYMENTS

From UK banks (CHAPS* payments)

Sort code: 55-91-00
 Bank: Isle of Man Bank, East Region,
 2 Athol Street, Douglas, Isle of Man
 Beneficiary: Utmost International Isle of Man Limited
 IBAN***: GB94NWBK55910010939946

From non-UK banks (SWIFT payments)**

SWIFT code: RBOSIMD2XXX
 Sort code: 55-91-00
 Bank: Isle of Man Bank, East Region,
 2 Athol Street, Douglas, Isle of Man
 Beneficiary: Utmost International Isle of Man Limited
 IBAN: GB94NWBK55910010939946

OTHER CURRENCY PAYMENTS (SWIFT PAYMENTS)

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

SWIFT code: NWBKGB2LXXX

Bank: National Westminster Bank, London

IBAN: (select as applicable, see below)

1. US Dollar	IBAN - GB05NWBK60730167544800
2. EURO	IBAN - GB63NWBK60720267545858
3. Australian Dollar	IBAN - GB18NWBK60730167535836
4. Canadian Dollar	IBAN - GB80NWBK60730167521916
5. Danish Krone	IBAN - GB22NWBK60730167545270
6. Hong Kong Dollar	IBAN - GB52NWBK60730167555691
7. Japanese Yen	IBAN - GB40NWBK60730167538835
8. New Zealand Dollar	IBAN - GB26NWBK60730167576141
9. Norwegian Krone	IBAN - GB23NWBK60730167568823
10. Singapore Dollar	IBAN - GB53NWBK60730167598838
11. Swedish Krona	IBAN - GB69NWBK60730167554997
12. Swiss Franc	IBAN - GB14NWBK60730167541534

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

** SWIFT is an acronym for Society for Worldwide Interbank Financial Telecommunications.

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

F 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 Isle of Man Limited 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 Isle of Man Limited

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 Isle of Man Limited. 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.

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

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

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.

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

G SOURCE OF FUNDS

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 (state currency)	<input style="width: 95%;" type="text"/>
Payment amount	<input style="width: 98%;" type="text"/>				
Name as stated on bank account	<input style="width: 98%;" type="text"/>				
Sort code (If applicable)	<input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> - <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> - <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/>				
ABA number	<input style="width: 98%;" type="text"/>				
Branch code for non-UK banks	<input style="width: 98%;" type="text"/>				
Account number/IBAN	<input style="width: 98%;" type="text"/>				
SWIFT or BIC code (If applicable)	<input style="width: 45%;" type="text"/>				
Bank name	<input style="width: 98%;" type="text"/>				
Bank's full address	<input style="width: 98%;" type="text"/>				
	<input style="width: 60%;" type="text"/>			<input style="width: 40%;" type="text"/>	
How long have you held this account	<input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> years		<input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> months		

FURTHER PAYMENTS - IF APPLICABLE

Bank details 2

Payment currency	€	US\$	£	Other (state currency)	<input style="width: 95%;" type="text"/>
Payment amount	<input style="width: 98%;" type="text"/>				
Name as stated on bank account	<input style="width: 98%;" type="text"/>				
Sort code (If applicable)	<input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> - <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> - <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/>				
ABA number	<input style="width: 98%;" type="text"/>				
Branch code for non-UK banks	<input style="width: 98%;" type="text"/>				
Account number/IBAN	<input style="width: 98%;" type="text"/>				

COLLECTIVE OR EXECUTIVE BOND
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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\$ £ Other (state currency)

Payment amount

Name as stated on bank account

Sort code (If applicable) - -

ABA number Branch code for non-UK 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 Isle of Man Limited 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 Isle of Man Limited.

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 years

Institution holding the funds

Name of account where earned income accumulated

Account number

Sort code - -

Length of time funds have been in this account years months

Main occupation during the accumulation period (e.g. Director)

Industry/Business sector

Main employer's name

Employer's address

 Postcode

Date employment commenced

Average annual salary over the accumulation period Currency Amount

Average annual bonus over the accumulation period Currency Amount

b. Compensation

Name of organisation or individual that paid compensation

Reason for compensation

Country compensation was awarded

Total amount received Currency Amount

Date received

c. Competition win

Name of competition organiser

Description of competition

Country competition was held in

Total amount won Currency Amount

Date of win

d. Gift

Full name of person who gave the gift

Date of birth

Nationality

Address

 Postcode

Relationship to Applicant

Reason for gift

Description of gift

Total amount received Currency Amount

Date received

Details of the activity that generate the amount received

Country gift was accumulated in

e. Inheritance

Deceased's full name

Relationship to Applicant

Date of death

Details of the inheritance. Tell us about the assets forming the inheritance (e.g. cash, property, shares etc.)

Amount received Currency Amount

Date received

Details of the activity that generated the amount received

COLLECTIVE OR EXECUTIVE BOND
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Country inheritance was accumulated in

Solicitor/lawyer's (who dealt with the estate) name

Solicitor or lawyer's firm name

Solicitor or lawyer's firm address

 Postcode

f. Loan

Name of loan provider

Address of loan provider

 Postcode

Total amount borrowed Currency Amount

Date of loan

Purpose of loan

g. Maturing policy/policy claim/replacement policy

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

Name of policy provider

Address of policy provider

 Postcode

Policyholder's full name

Length of time policy held years months

Amount of the original investment

Details of the activity that generated the original investment

Reason for policy claim or replacement policy (if applicable)

Total amount received Currency Amount

Surrender penalty (if applicable)

Date received

h. Sale of asset portfolio or investment

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

Description of asset portfolio or investment (e.g. 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

Amount of the original investment

Details of the activity that generated the original investment

Date of sale

Net amount received Currency Amount

i. Sale of interest in company

Company name

Industry/business sector

Address of company

 Postcode

Your connection with the company
For example: owner, partner or shareholder

Date connection with the company began

Average year dividend/income from the company over the previous three years

Date of sale

Sale amount Currency Amount

Net amount received i.e. the amount you have received after any deductions such as fees and taxes. Currency Amount

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
--	--	-------	--	--	--------

Source of funds for the original property purchase

--

Was the property your main residence?

Yes	No
-----	----

If "Yes" was an alternative main residence purchased?

Yes	No
-----	----

If "Yes" please confirm Purchase price

--

Address of new residence

Postcode

Date of sale

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

Total sale amount

Currency		Amount	
----------	--	--------	--

Net amount Applicant received from sale

Currency		Amount	
----------	--	--------	--

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	
----------	--	--------	--

H REGULAR WITHDRAWALS

NOTE

Minimum amount for regular withdrawals is £500/\$750/€750 (or currency equivalent) regardless of frequency.

WITHDRAWAL AMOUNT

Total amount to be withdrawn each year

or

Percentage of premium to be withdrawn each year %

Payment currency € US\$ £ Other (state currency)

Withdrawal frequency (✓) Monthly Every 2 months Quarterly Half-yearly Yearly

NOTE

What about tax?

We strongly suggest you contact your financial adviser before making a decision to take regular withdrawals, in order to make sure that this is the most suitable withdrawal option for you, and also to find out if this will have any tax consequence.

Date of first payment

(If your Policy has not been accepted by us on the due date then your first payment will be made on the next payment date according to the frequency chosen.)

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

PAYEE DETAILS

We will only pay withdrawals to policyholders and will not make payments to third parties.

Would you like your withdrawals to be made to the same bank account detailed in Section G 'Source of Funds'? Yes No

If 'No' please complete the section below.

If 'Yes' and you have entered more than one set of bank account details in the 'Source of Funds' section, which details shall we use? 1 2 3

Until further notice, I/we would like regular withdrawals to be made to:

Name as stated on bank account

Bank account number/IBAN

Sort code (applicable to UK accounts) - - Branch code for non-UK payments

ABA number

SWIFT or BIC code - - ABA number

(SWIFT code needed for bank accounts outside Europe; BIC code needed for European accounts with an IBAN)
(An ABA number is a code used for electronic payment to and from a US bank account)

COLLECTIVE OR EXECUTIVE BOND
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Bank name			
Bank address			
	Country	Postcode	

NOMINATED ASSET(S)

Please state which asset(s) listed in Section F is/are to be used as the Nominated Asset to pay regular withdrawals. This will only apply where you have not chosen an authorised custodian.

NOTE

You are required to keep a sufficient balance in your Nominated Asset to cover all withdrawals and fees debited to your policy. Therefore we are unable to pay any withdrawals or fees if there is an insufficient balance in your Nominated Asset.

If there are any further Nominated Assets, please photocopy this page, attach the details with this application form and tick here

ISIN/ SEDOL	<input style="width: 100%;" type="text"/>	Name	<input style="width: 100%;" type="text"/>	Percentage	<input style="width: 100%;" type="text"/> %
ISIN/ SEDOL	<input style="width: 100%;" type="text"/>	Name	<input style="width: 100%;" type="text"/>	Percentage	<input style="width: 100%;" type="text"/> %
ISIN/ SEDOL	<input style="width: 100%;" type="text"/>	Name	<input style="width: 100%;" type="text"/>	Percentage	<input style="width: 100%;" type="text"/> %
ISIN/ SEDOL	<input style="width: 100%;" type="text"/>	Name	<input style="width: 100%;" type="text"/>	Percentage	<input style="width: 100%;" type="text"/> %
ISIN/ SEDOL	<input style="width: 100%;" type="text"/>	Name	<input style="width: 100%;" type="text"/>	Percentage	<input style="width: 100%;" type="text"/> %

I NUMBER OF POLICIES - NEW CONTRACTS ONLY

Number of policies you would like

NOTE

No more than 9,999 policies are available.
 If you do not specify the number of policies, we will issue 12.
 The amount of policies cannot change after your bond is live.
 The minimum investment amount for each individual policy is £500, US\$750 or €750. If the investment is £25,000, the maximum number of policies available is 50.

J DECLARATIONS AND APPLICATION

If there are more than two applicants, please photocopy all of this section, attach the details with this application form and tick here (✓)

NOTE

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

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 will process personal information about me and any other party whose personal information I have provided.

The type of personal information processed about me will depend on the purpose for which it has been collected and will include:

- › my contact details
- › information to verify my identity
- › information about my family, lifestyle, health and finances
- › my payment details.

The processing of my personal information may take place in a number of jurisdictions and may be shared with other parties within or outside the Utmost group of companies for the general purpose of establishing, maintaining and servicing an insurance policy. The sharing of my personal data may be used for any or all of the following purposes, to:

- › check against credit reference or other databases to verify information provided for regulatory due diligence purposes and to prevent or detect financial crime including money laundering, terrorist financing, bribery and corruption, sanctions listing or fraud;
- › allow for the provision of services relating to enhanced due diligence, underwriting, reinsurance, data hosting, online services, payment or reporting of any tax or levy, or any other services provided from time to time;
- › enable an appointed financial adviser or fund adviser to assist in the provision of services to the policyholder;
- › compile statistical analysis or market research, where information is not specific to the individual;
- › comply with any legal obligation which includes the releasing of personal information to regulators, law enforcement authorities or other bodies where there is a legal requirement to do so, including the sharing of information under regulations relating to the U.S Foreign Account Tax Compliance Act and The Organisation for Economic Co-operation and Development Common Reporting Standards;
- › enable an appointed discretionary asset manager or custodian to meet their legal or regulatory requirements, where that discretionary asset manager or custodian providing services in relation to a policy requests the personal data of an individual linked to an application, and where we are satisfied that such a discretionary asset manager or custodian has a legal or regulatory requirement to make such a request.

Where my personal information is shared with a third party for the provision of services relating to my policy, my personal information will only be used for the purposes for which it was collected. In some circumstances this may involve a transfer of my personal information to a third party outside the European Economic Area (EEA). Whenever my personal information is shared it will be subject to the same levels of security and protection that Utmost International Isle of Man Limited would apply.

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

I have been made aware that a full explanation of how Utmost International Isle of Man Limited collects, uses and shares my personal information can be found at www.utmostinternational.com/privacy-statements/

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

For Utmost 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@utmostgroup.com

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

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 Isle of Man Limited 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 Isle of Man Limited throughout this declaration.

1. I understand that Utmost International Isle of Man Limited has designated the Policy as suitable only for Professional Investors as defined by Utmost International Isle of Man Limited in the Policy terms and conditions.
2. I confirm that I meet the definition of a Professional Investor. I understand that Utmost International Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited where a Discretionary Asset Manager has been appointed.

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

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 Isle of Man Limited, 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 Isle of Man Limited Collective Bond or Executive Bond, and request Utmost International Isle of Man Limited 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 Isle of Man Limited with any further information in respect of this application on request.
10. I confirm that Utmost International Isle of Man Limited 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 Isle of Man Limited is not responsible for any loss suffered or reduction in the value of my Policy arising from my investment. Utmost International Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited may receive payments in the form of fund manager rebates, from an Asset provider in respect of the Assets held, and which Utmost International Isle of Man Limited may share with my Financial Adviser.
14. I authorise and request Utmost International Isle of Man Limited to effect the Regular Withdrawals detailed in section H and confirm that such payments will discharge Utmost International Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited 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 Isle of Man Limited) will be issued directly by the Isle of Man office of Utmost International Isle of Man Limited.
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 Isle of Man Limited.
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.

Please enter the country in which this application form was completed.

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This application must be completed by the applicant(s) unless you have asked your financial adviser to complete it.

Did you complete this application form yourself? (✓) Yes No

If No, did a third party, such as your financial adviser, complete it on your behalf? (✓) Yes No

By signing the Declarations in Section J of the application, you confirm that you have read them and, if a third party has completed the application form on your behalf, that all the information provided in it is correct.

SIGNATURE	Applicant 1/Trustee 1/Authorised Signatory 1 <div style="border: 1px solid black; height: 50px; margin-top: 5px;"></div>	Applicant 2/Trustee 2/Authorised Signatory 2 <div style="border: 1px solid black; height: 50px; margin-top: 5px;"></div>																
Date	<table border="1" style="border-collapse: collapse; width: 100%; height: 20px;"> <tr> <td style="width: 12.5%; text-align: center;">d</td> <td style="width: 12.5%; text-align: center;">d</td> <td style="width: 12.5%; text-align: center;">m</td> <td style="width: 12.5%; text-align: center;">m</td> <td style="width: 12.5%; text-align: center;">y</td> <td style="width: 12.5%; text-align: center;">y</td> <td style="width: 12.5%; text-align: center;">y</td> <td style="width: 12.5%; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y	<table border="1" style="border-collapse: collapse; width: 100%; height: 20px;"> <tr> <td style="width: 12.5%; text-align: center;">d</td> <td style="width: 12.5%; text-align: center;">d</td> <td style="width: 12.5%; text-align: center;">m</td> <td style="width: 12.5%; text-align: center;">m</td> <td style="width: 12.5%; text-align: center;">y</td> <td style="width: 12.5%; text-align: center;">y</td> <td style="width: 12.5%; text-align: center;">y</td> <td style="width: 12.5%; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y											
d	d	m	m	y	y	y	y											

Further copies of the Policy Terms and/or this completed application form are available on request.

K FINANCIAL CRIME - RISK RATING

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.utminternational.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 International Isle of Man Limited 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 sales consultant in the first instance, or alternatively contact Utmost International Isle of Man Limited'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 true 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.

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

Individual trustees

Enclosed (✓)

- | | |
|---|--------------------------|
| 1. Verification of the identity and address of all individual trustees - please refer to parts A and B above for the necessary identification documents. | <input type="checkbox"/> |
| 2. Verification of the identity and address of the protector (where appropriate). | <input type="checkbox"/> |
| 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. | <input type="checkbox"/> |
| 4. The trustees (settlor(s) where policies to be settled into trust) should provide the name, current residential address and date of birth or death for all the parties to the trust, for example settlor/donor, protector, beneficiaries. If the beneficiaries are not named you must provide the class of beneficiaries, for example grandchildren. Please continue on a further sheet if necessary. | <input type="checkbox"/> |

Capacity

Settlor/Donor Protector Beneficiary

Name											
Date of birth or death	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px; text-align: center;">d</td> <td style="width: 25px; text-align: center;">d</td> <td style="width: 25px; text-align: center;">m</td> <td style="width: 25px; text-align: center;">m</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y	Birth	Death
d	d	m	m	y	y	y	y				
Residential address											
	Country	Postcode									

Capacity

Settlor/Donor Protector Beneficiary

Name											
Date of birth or death	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px; text-align: center;">d</td> <td style="width: 25px; text-align: center;">d</td> <td style="width: 25px; text-align: center;">m</td> <td style="width: 25px; text-align: center;">m</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y	Birth	Death
d	d	m	m	y	y	y	y				
Residential address											
	Country	Postcode									

Capacity

Settlor/Donor Protector Beneficiary

Name											
Date of birth or death	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px; text-align: center;">d</td> <td style="width: 25px; text-align: center;">d</td> <td style="width: 25px; text-align: center;">m</td> <td style="width: 25px; text-align: center;">m</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> <td style="width: 25px; text-align: center;">y</td> </tr> </table>	d	d	m	m	y	y	y	y	Birth	Death
d	d	m	m	y	y	y	y				
Residential address											
	Country	Postcode									

Capacity

Settlor/Donor Protector Beneficiary

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

Date of birth or death

d	d	m	m	y	y	y	y
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Birth

Death

Residential address

Country	Postcode

Class of beneficiary if not named (an extract of the deed may be provided)

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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.

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

PART A INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED

1. Name	<input style="width: 100%;" type="text"/>		
Capacity	<input style="width: 100%;" type="text"/>		
Type of document	Passport	National identity card	
Document reference	<input style="width: 100%;" type="text"/>		
2. Name	<input style="width: 100%;" type="text"/>		
Capacity	<input style="width: 100%;" type="text"/>		
Type of document	Passport	National identity card	
Document reference	<input style="width: 100%;" type="text"/>		
3. Name	<input style="width: 100%;" type="text"/>		
Capacity	<input style="width: 100%;" type="text"/>		
Type of document	Passport	National identity card	
Document reference	<input style="width: 100%;" type="text"/>		
4. Name	<input style="width: 100%;" type="text"/>		
Capacity	<input style="width: 100%;" type="text"/>		
Type of document	Passport	National identity card	
Document reference	<input style="width: 100%;" type="text"/>		

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 CUSTOMER DUE DILIGENCE (CDD) REQUIREMENTS AND FINANCIAL ADVISER DECLARATION

SECTION 1 - HOW HAS THE CUSTOMER DUE DILIGENCE (CDD) BEEN OBTAINED

This section must be completed in all instances by the Financial Adviser/Suitable Certifier.

SECTION 1(A) - PROVISION OF CUSTOMER DUE DILIGENCE "CDD"

To allow us to understand how the CDD provided has been obtained, please select one of the following options:

- 1 All elements of CDD provided were obtained by me directly from the customer.
- 2 Some elements of CDD provided were obtained by me directly from the customer.
- 3 None of the CDD provided was obtained by me directly from the customer.

If option 2 or option 3 have been selected, please complete Section 1(b).

SECTION 1(B) - THIRD PARTIES PROVIDING CDD

Where some or all elements of CDD have been provided by third parties, please complete the following details explaining what those CDD items are and who provided them.

CDD ITEM PROVIDED (E.G. DETAILS OF PASSPORT, BANK STATEMENT OR UTILITY BILL)	FULL NAME OF THE THIRD PARTY PROVIDING THE CDD	RELATIONSHIP OF THE THIRD PARTY TO THE CUSTOMER (E.G. SOLICITOR, ACCOUNTANT)

Where third parties have been named above, please provide their full details in section 3 below.

SECTION 2(A) - CUSTOMER MEETINGS

To allow us to understand who and by what means the customer has been met, please select one of the following options:

- 1 I met the customer in person on
- 2 I met the customer face to face via live video stream on
- 3 I have not met the customer but they have been met in person by a third party.
- 4 I have not met the customer but they have been met via live video stream by a third party.
- 5 The customer has not been met by any party.

If option 3, 4 or 5 have been selected, please complete Section 2(b).

SECTION 2(B) - THIRD PARTIES WHO HAVE MET CUSTOMERS

Where a third party has met the customer, please provide the details of the third party and the circumstances of the meeting.

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FULL NAME OF THE THIRD PARTY WHO MET THE CUSTOMER	HOW THE THIRD PARTY MET THE CUSTOMER (I.E. IN PERSON OR VIA LIVE VIDEO STREAM)	DATE THE THIRD PARTY MET THE CUSTOMER	RELATIONSHIP OF THE THIRD PARTY TO THE CUSTOMER (E.G. SOLICITOR, ACCOUNTANT ETC.)
		d d m m y y y y	
		d d m m y y y y	
		d d m m y y y y	

Where third parties have been named above, please provide their full details in section 3 below.

If option 5 in Section 2(a) has been selected, indicating the customer has not been met by any party, please provide an explanation in the box below why the customer has not been met.

SECTION 3 - DETAILS OF THIRD PARTIES

Where third parties have been named in sections 1(b) and/or 2(b), please provide their full details below so we may determine the individual's regulatory status.

Full Name of Individual	<input style="width: 95%;" type="text"/>
Occupation	<input style="width: 95%;" type="text"/>
Date of Birth	d d m m y y y y
Residential Address	<input style="width: 95%;" type="text"/>
	<input style="width: 95%;" type="text"/>
	<input style="width: 45%; border: none;" type="text" value="Postcode"/> <input style="width: 45%; border: none;" type="text" value="Country"/>
Registered Company Name	<input style="width: 95%;" type="text"/>
Registered Company Address	<input style="width: 95%;" type="text"/>
	<input style="width: 95%;" type="text"/>
	<input style="width: 45%; border: none;" type="text" value="Postcode"/> <input style="width: 45%; border: none;" type="text" value="Country"/>
Associated Professional Body	<input style="width: 95%;" type="text"/>
Professional Body Membership Reference	<input style="width: 95%;" type="text"/>

If more than one third party has been named in section 1(b) and/or 2(b), please take a copy of Section 3 and complete the details of the additional third party.

How to certify documents is outlined in the document **Anti-Money Laundering and Document Certification Requirements**.

SECTION 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 Isle of Man Limited upon request.

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

on

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

Regulator name

Utmost International Isle of Man Limited financial adviser account number

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SIGNATURE

Financial Adviser

Full name of financial adviser

Date

d	d	m	m	y	y	y	y
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Financial Adviser stamp

COLLECTIVE OR EXECUTIVE BOND
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A WEALTH *of* DIFFERENCE

www.utmostinternational.com

Utmost International Isle of Man Limited is registered in the Isle of Man, registered number 024916C. Registered Office address: King Edward Bay House, King Edward Road, Onchan, IM99 1NU, Isle of Man.

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 13966 | 07/25