

# Surrender Request and Regular Withdrawal Form

This form should be completed by the Policyholder for all Partial Surrenders, Regular Withdrawals and a Full Surrender.

Policy number: \_\_\_\_\_

Policyholder: \_\_\_\_\_

Regular Withdrawal       Partial Surrender       Mixed Surrender       Full Surrender

**If there is insufficient liquidity the payment can be delayed. Note that charges may apply. Please check the Terms and Conditions for details.**

**Regular Withdrawal**

Please check your Terms and Conditions to ensure that your Regular Withdrawal amount meets the minimum amount and frequency.

Amount (in words and digits): \_\_\_\_\_

\_\_\_\_\_

**or**

Percentage of Premiums paid: \_\_\_\_\_ %

Frequency: Monthly       Quarterly       Half-yearly       Annually

Commencing:

**Partial Surrender**

Please check your Terms and Conditions to ensure that your Partial Surrender amount meets the minimum amount.

Amount (in words and digits): \_\_\_\_\_

\_\_\_\_\_

**or**

Percentage of Premiums paid: \_\_\_\_\_ %

For all United Kingdom residents please indicate below whether you want to surrender individual Policies within the Assurance Policy or whether the surrender is to be performed equally across all Policies.

Individual Policies       Across Policies

(Continued overleaf)

# Surrender Request and Regular Withdrawal Form (continued)

**Mixed Surrender**

This option allows you to withdraw an amount of money from the Assurance Policy equal to your available tax deferred allowance and to take an additional amount of money by the Full Surrender of additional Policies.

Amount equal to my available tax deferred allowance

**and**

Amount (in words and digits): \_\_\_\_\_

**Full Surrender**

Please check your Terms and Conditions to ensure your Full Surrender meets all requirements.

The original Policy Schedule should be returned with this form when a Full Surrender is being requested. **If the original Policy Schedule cannot be provided, tick the Lost Policy Schedule declaration box below.**

**Lost Policy Schedule declaration**

My signature below is confirmation that:

- I have never received the Policy Schedule/the Policy Schedule cannot be located and I believe it has been lost or destroyed.
- I declare that to my knowledge the Policy has never been assigned, used as security for a mortgage, charge or lien and I am the only person legally entitled to the Policy benefit. I undertake to forward the original Policy Schedule if it is found to Utmost PanEurope dac (Utmost PanEurope).
- the information I have given in this form and the supporting documentation I have provided are correct and accurate.
- I have not withheld any information that might be relevant to this Full Surrender.
- I agree to indemnify Utmost PanEurope against any claims or costs incurred as a result of relying on the information I have provided.

**Tax**

Tax may be payable when you make either a Full or a Partial Surrender.

There are different tax consequences depending on how you make a surrender from your Policies, which is whether you make a surrender of full Policies or by surrendering across all Policies, which uses the 5% tax deferred allowance. Please note that 5% tax deferred allowance does not apply to corporate Policyholders. Please note that where you have requested us to facilitate the payment of ongoing Adviser charges to your Intermediary, this may affect the calculation of the amount to be surrendered.

If you are in any doubt as to how your surrender will be taxed, please consult your Intermediary or professional Adviser before submitting this form.

(Continued overleaf)

# Surrender Request and Regular Withdrawal Form (continued)

**Reason for Surrender**

For the purpose of our regulatory obligations please provide an explanation for requesting the surrender:

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**International Tax Compliance Self-Certification Form**

Utmost PanEurope dac (Utmost PanEurope) is required by Irish law to ask the Policyholder for tax related information. Utmost PanEurope may be required to pass on this information to The Office of the Revenue Commissioners in Ireland. This form incorporates the requirements of:

- i. the US Foreign Account Tax Compliance Act (FATCA) based on the Intergovernmental Agreement signed on 21 December 2012 between the US Government and the Irish Government.
- ii. the Standard for Automatic Exchange of Financial Account Information in Tax Matters, commonly known as the Common Reporting Standard (CRS), as implemented in Irish law.

If you have any questions on how to complete this form, Utmost PanEurope recommends that you speak to your tax or legal adviser.

Individual  Entity

**Individual**

**Once this section is completed please continue to the Declaration section and sign the form.**

If there are more than two Policyholders, please use a separate sheet to provide the required information.

First Policyholder	Second Policyholder (if any)
Name:	Name:
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Current residential address:	Current residential address:
Primary country of tax residence <sup>1</sup> :	Primary country of tax residence <sup>1</sup> :
Taxpayer Identification Number (TIN):	Taxpayer Identification Number (TIN):
Citizen/Resident in the United States: Yes <input type="checkbox"/> No <input type="checkbox"/>	Citizen/Resident in the United States: Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, US Federal TIN:	If yes, US Federal TIN:

(Continued overleaf)

<sup>1</sup> If you are tax resident in more than one country, please use a separate sheet and indicate the country of tax residence and the associated TIN. Where you are tax resident in more than one country, your primary country of tax residence is determined by reference to the terms of the applicable Double Taxation Agreement. You should consult your tax adviser if you have multiple tax residencies and you are unsure of your primary country of tax residence.

# Surrender Request and Regular Withdrawal Form (continued)

**Entity**

Address: \_\_\_\_\_  
 \_\_\_\_\_

Country of incorporation/organisation: \_\_\_\_\_

Country of tax residence<sup>2</sup>: \_\_\_\_\_

Tax Identification Number (TIN): \_\_\_\_\_

**All entities must complete part 1 and part 2.**

**Part 1: Foreign Account Tax Compliance Act (FATCA)**

Is the entity a foreign financial institution? Yes  No

If **yes**, please state your Global Intermediary Identification Number (GIIN):  
 -  -  -

If you do not hold a GIIN but are sponsored by another entity, please provide your sponsor's GIIN:  
 -  -  -

If the entity is a foreign financial institution but does not hold a GIIN or sponsor GIIN, the entity will be classified as a Non-Participating Foreign Financial Institution (NPFPI).

If **no**, is the entity classified as an **Active** Non-Financial Foreign Entity (NFFE)? Yes  No

If the entity is not a foreign financial institution or Active NFFE, the entity will be classified as a **Passive** NFFE and **part 3 must be completed.**

**Part 2: Common Reporting Standard (CRS)**

a. Is the entity a financial institution? Yes  No

If **yes**, and the financial institution is an investment entity located in a non-participating jurisdiction and managed by another financial institution, **part 3 must be completed.**

Please tick the box if this applies and continue to part 3.

If **no**, is the entity excluded from reporting under CRS? Yes  No

b. If the answer is no to question a, is the entity classified as an **Active** Non-Financial Entity (NFE)? Yes  No

If the entity is not a financial institution or Active NFE, the entity will be classified as a **Passive** NFE and **part 3 must be completed.**

(Continued overleaf)

<sup>2</sup> If the entity is tax resident in more than one country, please use a separate sheet and indicate the country of tax residence and the associated TIN. If not tax resident in any country, please provide the country of effective management or principal office location. Where the entity is tax resident in more than one country, the primary country of tax residence is determined by reference to the terms of the applicable Double Taxation Agreement. You should consult your tax adviser if you have multiple tax residences and you are unsure of the primary country of tax residence.

# Surrender Request and Regular Withdrawal Form (continued)

**Part 3: Controlling person**

Where required and as indicated by your answers above, please provide details on all controlling persons identified as part of anti-money laundering and know your customer processes. If there are more than two controlling persons, please use a separate sheet to provide the required information.

First controlling person	Second controlling person (if any)
Name:	Name:
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Current residential address:	Current residential address:
Primary country of tax residence <sup>3</sup> :	Primary country of tax residence <sup>3</sup> :
Taxpayer Identification Number (TIN):	Taxpayer Identification Number (TIN):
Citizen/Resident in the United States: Yes <input type="checkbox"/> No <input type="checkbox"/>	Citizen/Resident in the United States: Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, US Federal TIN:	If yes, US Federal TIN:

**General information**

Utmost PanEurope does not provide any tax or legal advice. It is the Policyholder’s responsibility to comply with all relevant tax and legal requirements in their jurisdiction of residence and seek their own independent tax and legal advice regarding their particular circumstance.

Utmost PanEurope comply with all legal obligations where it operates, including providing any necessary reports to the relevant tax authorities where required and will withhold tax where it is required by law to do so. Policyholders should be aware that the surrender of an existing Policy in favour of a new proposal to another life office will most likely incur establishment charges.

**Data protection**

How we process your personal data

The General Data Protection Regulation ('GDPR') came into force across Europe on the 25th May 2018. GDPR aims to give European citizens more control over their data and to create a uniformity of rules to enforce across Europe.

Utmost PanEurope dac recognises that protecting your personal information including special categories of data (sometimes referred to as sensitive personal data), is very important to you and that you have an interest in how we collect, use, store and share such information. We have produced a privacy notice which clarifies these details and explains your rights in relation to your personal data and how to action those rights with us, including your right to make a complaint.

The privacy notice is available on our website [www.utmostinternational.com/privacy-statements/](http://www.utmostinternational.com/privacy-statements/)

We reserve the right to change the privacy notice from time to time at our sole discretion. We encourage you to periodically review the privacy notice to keep informed about how we use your personal data and how we keep it protected.

(Continued overleaf)

<sup>3</sup> If you are tax resident in more than one country, please use a separate sheet and indicate the country of tax residence and the associated TIN. Where you are tax resident in more than one country, your primary country of tax residence is determined by reference to the terms of the applicable Double Taxation Agreement. You should consult your tax adviser if you have multiple tax residencies and you are unsure of your primary country of tax residence.

# Surrender Request and Regular Withdrawal Form (continued)

**Collecting and processing your personal data is required to administer your policy. Utmost PanEurope dac must process your personal data in order to process your request and fulfil our contractual obligations under the policy. If you do not wish to provide us with your personal data, we may not be able to handle or process your request.**

**You should only provide personal information about another individual in this form where you have received their consent to do so. By signing this form, you are confirming that you have obtained the required consent of any other individual whose data may be provided in this form.**

**Payment details**

Please note that IBAN and BIC/Swift are required for all European payments and will be paid in Policy currency.

Name of account holder: \_\_\_\_\_

Name of bank: \_\_\_\_\_

Address of bank: \_\_\_\_\_  
\_\_\_\_\_

Account number: \_\_\_\_\_ Sort code: \_\_\_\_\_

BIC/Swift: \_\_\_\_\_ IBAN: \_\_\_\_\_

**Declaration**

My signature below is confirmation that:

- I acknowledge that the information contained in this form and information regarding my Policy may be shared with The Office of the Revenue Commissioners in Ireland and exchanged with the tax authorities of another country or countries as required under intergovernmental agreements.
- I agree to inform Utmost PanEurope within 30 days of a change in circumstances that causes any information on this form to become incorrect by the completion of a new International Tax Compliance Self-Certification form.
- I declare that I have examined the information on this form and to the best of my knowledge and belief, it is true, correct and complete.

<b>Signature of first Policyholder:</b>  	<b>Signature of second Policyholder (if any):</b>  
Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

(Continued overleaf)

# Surrender Request and Regular Withdrawal Form (continued)

## Declaration (continued)

In certain circumstances the following signatures are required:

- If the Policy has been pledged or transferred in another similar manner that another party's consent is required.

Name: \_\_\_\_\_

**Signature:**

Date:

## Utmost PanEurope dac

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## A WEALTH *of* DIFFERENCE

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

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

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

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

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