

SWITCH INSTRUCTION FORM

Utmost Wealth Solutions is the brand name used by a number of Utmost companies. This item has been issued by Utmost PanEurope dac.

IMPORTANT INFORMATION

Please ensure that all sections are fully completed. In this form words in the singular shall include the plural and vice versa.

HOW TO COMPLETE THIS FORM

This form should be completed using **blue or black ink** and **BLOCK CAPITALS**. If you make a mistake, cross it out, put in the correct words and sign your initials next to the correction. **Do not use correction fluid.**

WHAT TO DO WHEN YOU HAVE COMPLETED THIS FORM

Our preference is to receive documentation scanned and emailed. Please return the completed form(s) and supporting suitably certified documentation to Info@UTMOST.ie.

If you are unable to send documentation electronically, it can be posted to Utmost PanEurope dac, Bishop's Square, Redmond's Hill, Dublin 2, Ireland.

HOW WE USE YOUR INFORMATION

Our Privacy Statement explains when and why we collect personal information about our customers, how we use it, the conditions under which we may share it with others and how we keep it secure. It also explains how long we keep customer information for, how a customer can obtain details of the information we keep and the choices customers have about how we use that information. You can find a copy at www.utmostinternational.com/privacy-statements or you can request a copy from our Client Relations Team.

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.

A BOND DETAILS

Contract Type (tick one box only) Investment Bond Inheritance Plan
 Universal Capital Account Flexible Investment Plan

Plan Number

B OWNERS OF THE BOND - PERSONAL INVESTORS ONLY

	Owner 1	Owner 2
Title (Mr, Mrs, Miss or Other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames (in full)	<input type="text"/>	<input type="text"/>
Address (for correspondence)	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>

 If there is an additional bond owner, photocopy this page, complete the details and attach securely to this form.

	Owner 3	Owner 4
Title (Mr, Mrs, Miss or Other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames (in full)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Address (for correspondence)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>

If there is an additional bond owner, photocopy this page, complete the details and attach securely to this form.

BOND OWNER(S) - TRUSTEE/CORPORATE INVESTORS ONLY

Name of Trust/Corporate Body	<input type="text"/>
Address (for correspondence)	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Postcode	<input type="text"/>
	<input type="text"/>

Complete the details below for all of the Trustees/Authorised Signatories who are authorised to give instructions relating to this bond.

If there are any additional trustees/ authorised signatories, photocopy this page, complete the details and attach securely to this form.

	Trustee/Authorised Signatory 1	Trustee/Authorised Signatory 2
Name	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Name	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>

C SWITCH DETAILS

I confirm that the investment should be switched **from** the below funds, as follows:

Name of Existing Funds	Amount	OR	% of the fund value to be switched*		

Into the following funds.

Name of new Funds	Amount	OR	% of the total switch value*		

* Whole percentages only

Total 100%

IMPORTANT INFORMATION

1. Switch instructions will normally be carried out on the date as specified in sections **C** or **D** using the prices available on that date. However, there may be circumstances in which the switch may be delayed.
2. The minimum overall amount that can be switched is £1,000/€1,500/US\$1,500.
3. Unless 100% is switched out of a fund, the minimum overall amount that can be left in that fund is £1,000/€1,500/US\$1,500.
4. We will normally allow 12 free switches per year. However, we may apply a charge if we consider the number of switches in any period to be excessive.
5. If you switch out of the With Profits Fund we will adjust the value to take account of any Market Value Reduction or Terminal Bonus that may apply. However, we may not allow switches out of the With Profit Fund unless units have been held for at least 5 years. (The With Profits Fund is not available to the Flexible Investment Plan).
6. If the bond consists of more than one policy, the alterations will be made to all policies.

DATE OF SWITCH

The switch instruction is to take place on:

The next working day following receipt of the request

OR

At a later date

d	d	m	m	y	y	y	y
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D DECLARATION

- › I/We declare that I/we have the authority to give instructions in respect of the above numbered bond.
- › I/We instruct Utmost PanEurope dac to carry out the switch in accordance with the details above.

	Owner/Trustee/ Authorised Signatory 1	Owner/Trustee/ Authorised Signatory 2																
SIGNATURE																		
Date	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 150px; height: 20px;"><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="display: inline-table; border-collapse: collapse; text-align: center; width: 150px; height: 20px;"><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											

If there are additional owners/trustees/authorised signatories, photocopy this page, complete and attach securely to this form.

	Owner/Trustee/ Authorised Signatory 3	Owner/Trustee/ Authorised Signatory 4																
SIGNATURE																		
Date	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 150px; height: 20px;"><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="display: inline-table; border-collapse: collapse; text-align: center; width: 150px; height: 20px;"><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
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A WEALTH *of* DIFFERENCE