

# REQUEST FOR UTMOST INTERNATIONAL TO APPOINT A DISCRETIONARY ASSET MANAGER

(ON AN ADVISORY OR DISCRETIONARY AUTHORITY)



For Hong Kong use only

THIS DOCUMENT WAS LAST UPDATED IN MAY 2020.

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

All references to Utmost International refer to Utmost International Isle of Man Limited.

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

This form is for use with the following policies: Utmost International – Collective Investment Bond, Utmost International – Collective Investment Plan, Utmost International – Executive Investment Bond, Utmost International – Executive Investment Plan, Utmost International – Wealth Management Plan – where Tier 2 Assets apply and there is an Authorised Custodian account facility.

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

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

Policy number (if known)

(for example EIB 12345678)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Type of investor (✓)

Individual

Trustee

Corporate

## A DETAILS OF TRUSTEE POLICYHOLDER

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

|  |
|--|
|  |
|--|

## B DETAILS OF CORPORATE POLICYHOLDER

Corporate name

|  |
|--|
|  |
|--|

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**C** DETAILS OF INDIVIDUAL POLICYHOLDER(S)

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

|                  | Policyholder 1       |     |      |                      | Policyholder 2 (if any) |     |      |                      |
|------------------|----------------------|-----|------|----------------------|-------------------------|-----|------|----------------------|
| Title (✓)        | Mr                   | Mrs | Miss |                      | Mr                      | Mrs | Miss |                      |
|                  | Other                |     |      | <input type="text"/> | Other                   |     |      | <input type="text"/> |
| Full forename(s) | <input type="text"/> |     |      |                      | <input type="text"/>    |     |      |                      |
| Surname          | <input type="text"/> |     |      |                      | <input type="text"/>    |     |      |                      |

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

|   |                      |                      |
|---|----------------------|----------------------|
| Residential address<br>(Where you are currently living.<br>We are unable to accept PO<br>Boxes and 'care of' addresses)   | <input type="text"/> | <input type="text"/> |
|   | <input type="text"/> | <input type="text"/> |
|   | <input type="text"/> | <input type="text"/> |
|   | Postcode             | Postcode             |
| Registered office address<br>(Corporate and Corporate<br>Trustee Policyholders only. This<br>information must be provided<br>in full. We are unable to<br>accept PO Boxes and 'care of'<br>addresses) | <input type="text"/> |                      |
|   | <input type="text"/> |                      |
|   | <input type="text"/> |                      |
|   | Postcode             | Postcode             |
| Daytime telephone number<br>including dialling code   | <input type="text"/> | <input type="text"/> |
| E-mail address  | <input type="text"/> | <input type="text"/> |
| Fax number  | <input type="text"/> | <input type="text"/> |

**E** DETAILS OF THE DISCRETIONARY ASSET MANAGER

|  |                      |
|--|----------------------|
| Name of Discretionary<br>Asset Manager                               | <input type="text"/> |
| Discretionary Asset Manager's<br>firm name and registered<br>address | <input type="text"/> |
|  | Postcode             |

Type of Authority (✓)

Advisory authority

Advisory authority means the person or firm that holds regulatory authority to provide investment recommendations to Utmost International on its assets that are linked to a Portfolio Fund on a Utmost International Policy.

**Please note the policyholder will need to read and sign the declaration on pages four and five and the adviser will need to read and sign the declaration on page six.**

Discretionary authority

Discretionary authority means the person or firm holds regulatory authority to carry out discretionary investment management activities based on an agreed investment mandate and does not need to agree changes to the assets with Utmost International before they submit asset dealing instructions.

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Please note the policyholder will need to read and sign the declaration on page seven.

Discretionary Asset Manager  
Regulatory Authority name &  
licence number

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

**F** DISCRETIONARY ASSET MANAGER FEES

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

 %

each year (to be taken quarterly) of the value of the assets held by the authorised custodian shown above, or

where there is no authorised custodian named, in respect of the assets held by Utmost International's default custodian;

OR

monetary amount £  each year to be taken quarterly. The maximum percentage fee is 1.5%. This also applies to the monetary amount option. Please review the amount of the charge regularly to ensure it remains below the maximum allowed.

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

**G** INVESTMENT MANDATE

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

Name of documentation enclosed with this request form

1. Investment strategy

2. Risk criteria

3. Investment restrictions

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

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

1. I/We hereby request that Utmost International appoint a Discretionary Asset Manager on an advisory basis to provide investment recommendations to Utmost International on its assets that are linked to the Portfolio Fund for my/our Policy.
2. Assuming Utmost International appoint the Discretionary Asset Manager shown above to provide recommendations on investments, I/we hereby understand that the DAM appointed on an advisory basis will require my/our agreement to their recommendation before Utmost International make an investment decision and we understand that any agreement to the investment recommendation is not legally binding on Utmost International.
3. I/We have agreed with the Discretionary Asset Manager the investment objectives shown or referred to in the Investment Mandate above for the Portfolio Fund for which I/we will be wholly responsible.
4. I/We understand that Utmost International does place restrictions on the types of investments that may be selected.
5. I/We acknowledge that where Utmost International appoint an advisory DAM, a charge will be deducted from the Portfolio Fund. The amount of the charge will be as indicated in this form.
6. I/We confirm that I/we have either received a copy of the Policy Terms (including the Endorsement to amend the terms for Discretionary Asset Manager) or for my/our existing policy, I/we have received a copy of the Endorsement to change your existing Policy Terms for a Discretionary Asset Manager and have read them before completing this request form.
7. I/We understand that investment decisions are made by Utmost International.
8. I/We understand that the DAM appointed on an advisory basis will make a charge to Utmost International for the investment recommendations and ongoing suitability monitoring and we are aware of this fee and confirm it is acceptable.

|              |   |  |
|--------------|---|--|
| SIGNATURE    | Signatory 1   |  |
|              | <div></div>   | Date <div><div>d</div><div>d</div><div>m</div><div>m</div><div>y</div><div>y</div><div>y</div><div>y</div></div> |
| Full name    | <div></div>   |  |
| Capacity (✓) | <div>Individual</div> <div>Trustee</div> <div>Third party/pledge interest</div> <div>Director/Authorised Signatory</div> <div>Other <div></div></div> |  |

|              |   |  |
|--------------|---|--|
| SIGNATURE    | Signatory 2   |  |
|              | <div></div>   | Date <div><div>d</div><div>d</div><div>m</div><div>m</div><div>y</div><div>y</div><div>y</div><div>y</div></div> |
| Full name    | <div></div>   |  |
| Capacity (✓) | <div>Individual</div> <div>Trustee</div> <div>Third party/pledge interest</div> <div>Director/Authorised Signatory</div> <div>Other <div></div></div> |  |

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SIGNATURE

Signatory 3

Date

d

d

m

m

y

y

y

y

Full name

Capacity (✓)

Individual

Trustee

Third party/pledge interest

Director/Authorised Signatory

Other

SIGNATURE

Signatory 4

Date

d

d

m

m

y

y

y

y

Full name

Capacity (✓)

Individual

Trustee

Third party/pledge interest

Director/Authorised Signatory

Other

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

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

SIGNATURE

Full name

Date

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SIGNATURE

Full name

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REQUEST FOR UTMOST INTERNATIONAL TO APPOINT A DISCRETIONARY ASSET MANAGER  
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**I ADVISORY AUTHORITY DECLARATION - TO BE SIGNED BY THE ADVISER**

I/We accept the appointment by Utmost International to provide investment recommendations in respect of Utmost International's assets and to submit asset dealing instructions to the relevant Dealing Desk upon the following terms:

1. I/We confirm to Utmost International that I/we have the necessary authority and qualifications to make investment recommendations and I/we have completed these details in the 'Details of the Discretionary Asset Manager' section on page two.
2. I/We understand that I/we am/are required to obtain policyholder agreement to our investment recommendations before submitting the recommendations to Utmost International for them to make the investment decision. By submitting an investment recommendation either online or in written form, I/we confirm the policyholder has agreed to the recommendation.
3. I/We confirm that we will not recommend investments that would:
  - make the policy a 'personalised portfolio bond' in accordance with sections 515 to 526 of the Income Tax (Trading and Other Income) Act 2005 and any successor legislation
  - be registered in a jurisdiction which is on an OECD, FATF or similar 'black list'.
  - be realisable less frequently than quarterly
  - fall within the meaning of section 517 (Policies and Contracts) in the Income Tax (Trading and Other Income) Act 2005 and any successor legislation
4. I/We understand that I/we should obtain written confirmation of the policyholder's agreement to the investment recommendation and this must be retained by me/us. I/We understand that Utmost International may request copies of the records at any time.
5. I/We understand that Utmost International may terminate this appointment at any time by giving notice to me/the Firm as Discretionary Asset Manager.
6. I/We understand that Utmost International have the right to instruct the sale of assets where there is a debit balance on the Transaction Account for the Policy shown on page one as detailed in the Policy Terms.
7. I/We acknowledge that Utmost International will pay us the amount of fee shown in the Discretionary Asset Manager's fees section in this form.
8. I/We agree to indemnify Utmost International and its directors, officers and employees against any and all losses paid, suffered or incurred by Utmost International or its directors, officers or employees, directly or indirectly arising as a result of the breach of contract, negligence, wilful default or fraud by us or any of our directors, officers or employees in providing the services under this agreement.

**SIGNATURE**

**Authorised signatory 1**

**Authorised signatory 2**

Full name

Date

|   |   |   |   |   |   |   |   |
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For and on behalf of

Discretionary Asset  
Manager Firm (if applicable)

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

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

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

|                  |                               |         |   |
|------------------|-------------------------------|---------|---|
| <b>SIGNATURE</b> | <b>Signatory 1</b>            |         | Date  |
|                  | <input type="text"/>          |         | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Full name        | <input type="text"/>          |         |   |
| Capacity (✓)     | Individual                    | Trustee | Third party/pledge interest   |
|                  | Director/Authorised Signatory | Other   | <input type="text"/>  |

|                  |                               |         |   |
|------------------|-------------------------------|---------|---|
| <b>SIGNATURE</b> | <b>Signatory 2</b>            |         | Date  |
|                  | <input type="text"/>          |         | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Full name        | <input type="text"/>          |         |   |
| Capacity (✓)     | Individual                    | Trustee | Third party/pledge interest   |
|                  | Director/Authorised Signatory | Other   | <input type="text"/>  |

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**SIGNATURE**

**Signatory 3**

Date

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Full name

Capacity (✓)

Individual

Trustee

Third party/pledge interest

Director/Authorised Signatory

Other

**SIGNATURE**

**Signatory 4**

Date

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| d | d | m | m | y | y | y | y |
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Full name

Capacity (✓)

Individual

Trustee

Third party/pledge interest

Director/Authorised Signatory

Other

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

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

**SIGNATURE**

**Authorised signatory 1**

Full name

Date

|   |   |   |   |   |   |   |   |
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**Authorised signatory 2**

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|---|---|---|---|---|---|---|---|

**SIGNATURE**

**Authorised signatory 3**

Full name

Date

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

**Authorised signatory 4**

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
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|---|---|---|---|---|---|---|---|

Utmost International does not offer legal, tax or financial advice and we can accept no responsibility for any action taken or refrained from on the basis of information provided by us. Any information provided is based on our understanding of the current law and practice and is subject to change in the future.



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**Important note:** The product(s) named in this document and to which this document relates is accurate as at December 2021 and is subject to change.  
To ensure applicability with respect to a product and, if applicable, a related policy, before taking any action, please liaise with your adviser and/or contact us directly.

## A WEALTH *of* DIFFERENCE

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

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

Utmost International Hong Kong Office: Unit 2402C, Great Eagle Centre, 23 Harbour Road, Wanchai, Hong Kong.  
Tel: +852 3552 5888 Fax: +852 3552 5889. Authorised by the Insurance Authority of Hong Kong to carry on long-term business.

Utmost International Isle of Man Limited is registered in the Isle of Man under number 24916C.  
Registered Office: King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles.  
Tel: +44 (0)1624 655 555 Fax: +44 (0)1624 611 715. Licensed by the Isle of Man Financial Services Authority.

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

ULQ PR 12218 | 10/22