

REQUEST FOR WITHDRAWAL OR SURRENDER

LIFE INSURANCE PORTFOLIO, SILK LIFE PLAN AND TAILORED LIFE PLAN

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.

THIS DOCUMENT WAS LAST UPDATED IN AUGUST 2024.

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

WHAT TO DO WHEN YOU HAVE COMPLETED THIS FORM

The completed form and supporting documentation that are digitally signed and/or scanned can be emailed to us at: IOMpaymentsout@utmostgroup.com

Alternatively if completing a hard copy, return this form to: Utmost International Isle of Man Limited, King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles

For more information about what we can accept by email submission, please contact us on + 44 (0)1624 655 555

IMPORTANT INFORMATION

If completing a hard copy use black or blue 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.

This document contains links to relevant documents, websites and email addresses. Click on the **bold gold** words to access these links.

Please note that all references to Utmost International throughout this form refers to Utmost International Isle of Man Limited and Utmost International Isle of Man Limited Singapore Branch.

This form should only be used to request a partial or full surrender from a Life Insurance Portfolio, SILK Life Plan or Tailored Life Plan.

Before completing and submitting this form you should:

- › Speak to your financial adviser representative to ensure you are following the most suitable course of action for your circumstances.
- › Refer to your policy terms and literature.
- › Be fully aware of the possible tax consequences that may apply on taking money from your portfolio bond - this is particularly important for UK residents.
- › If surrendering, request an approximate calculation of the surrender value as early encashment charges may apply.

You can find further information and explanations in the Guidance Notes section of this document, or by contacting us.

There are a number of alternatives to surrendering part or all of your policy and before making a decision, you may wish to consider reviewing the assets you hold. This could give you the opportunity to achieve one or more of the following:

- › better performance
- › less risk
- › stable returns.

It is important to review your policies regularly because:

- › the investment market can change quickly
- › your attitude to risk may change.

NOTE

- › There may be charges associated with a full surrender which will be debited prior to payment.
- › Any payment instruction that has already been submitted and is in progress will be processed first and no further payment or surrender instruction can be processed until the previous payment has completed.
- › Utmost International cannot be held liable for any delays if multiple payment instructions are received when existing payment instructions are pending completion.

A POLICY DETAILS

MANDATORY

Please see the guidance notes on how to complete this section.

1 Policy number (for example SILK 12345678)

2 Type of investor Individual Trustee Corporate

3 The name of the Trust (if ticked Trustee under Q2)

4 The date the trust was created

5 The name of the Corporate (if ticked Corporate under Q2)

B POLICYHOLDER DETAILS

MANDATORY

If there are any further policyholders please photocopy this page, attach the details with this form, and tick here.

	Policyholder 1	Policyholder 2 (if any)
1 Title (Mr, Mrs, Miss or Other)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
2 First Name(s)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
3 Surname	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
4 Do you have a maiden name, previous name or alias?	Yes No	Yes No
If "Yes" provide the other name(s)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
5 Date of birth	<input style="width: 100%; height: 20px;" type="text" value="d d m m y y y y"/>	<input style="width: 100%; height: 20px;" type="text" value="d d m m y y y y"/>
6 Country of birth	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
7 Employment status	Employed Self Employed Retired Unemployed Homemaker	Employed Self Employed Retired Unemployed Homemaker
Date of retirement or unemployment or became homemaker	<input style="width: 100%; height: 20px;" type="text" value="d d m m y y y y"/>	<input style="width: 100%; height: 20px;" type="text" value="d d m m y y y y"/>

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8 Occupation (to include role and sector)	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
9 Employer	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
10 Employer address	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 80%; height: 20px;" type="text"/> Postcode	<input style="width: 80%; height: 20px;" type="text"/> Postcode
11 Residential address	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 80%; height: 20px;" type="text"/> Postcode	<input style="width: 80%; height: 20px;" type="text"/> Postcode
12 Daytime telephone number	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
13 E-mail address	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
14 Correspondence address	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input style="width: 80%; height: 20px;" type="text"/> Postcode	<input style="width: 80%; height: 20px;" type="text"/> Postcode
15 Country or Countries of tax residence	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
16 Tax identification number (TIN)	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
17 Citizen or Resident in the United States	Yes	No
	Yes	No
If "Yes", provide your US Federal TIN	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

FINANCIAL ADVISER REPRESENTATIVE DETAILS

Company name	<input style="width: 100%; height: 20px;" type="text"/>
Name of adviser	<input style="width: 100%; height: 20px;" type="text"/>
Contact number	<input style="width: 100%; height: 20px;" type="text"/>
E-mail address	<input style="width: 100%; height: 20px;" type="text"/>

Who is to be contacted in case of queries	Policyholder	Adviser
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THIRD PARTY/PLEDGEE/ASSIGNEE DETAILS

If third party/pledgee/assignee interest exists, please ensure that we have an up to date signatory list. If this has not already been provided, please also include ID and proof of residency of two directors which must be certified as true copies. Please also provide a copy of the third party/pledgee/assignee interest authority if not already provided.

Capacity	Third party	Pledgee	Third party	Pledgee
	Assignee		Assignee	

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Full name(s)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
	Postcode	Postcode

DETAILS OF NOMINATION (IF APPLICABLE)

Is the policy subject to a nomination?	Yes	No									
If yes, please indicate the type of nomination	Irrevocable Trust Nomination	Revocable Nomination									
Date of nomination	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">d</td><td style="width: 20px;">d</td><td style="width: 20px;">m</td><td style="width: 20px;">m</td><td style="width: 20px;">y</td><td style="width: 20px;">y</td><td style="width: 20px;">y</td><td style="width: 20px;">y</td> </tr> </table>			d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y				

Your surrender request will only be paid in accordance with the nomination if the nomination was registered and accepted by Utmost International while the policyholder was alive. It is not possible to accept and register any nomination received after the death of the policyholder.

C PAYMENT OPTIONS

MANDATORY

If you have chosen the Life Cover Only contract type, the sum assured may be reduced by an amount of any regular withdrawals and/or part surrender in a Policy year which exceeds your Annual Allowance (please refer to the guidance notes for further information).

Please see the guidance notes for information about the different options. If you do not indicate which currency you wish to receive the payment in, we will make the payment in your policy currency.

Please tick here if you have taken professional advice on the best way of cashing in your policy, taking your present tax status into account.

Currency	US\$	£	SG\$	HK\$	EUR
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Other (Please state) (refer to guidance notes for other currencies)	<input style="width: 95%;" type="text"/>
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Please indicate below which type of encashment you would like (Please tick one option only):

- › **Full surrender of all policies** (all assets will be sold)
- › **Identical part surrenders from all policies to release a total sum** (withdrawal)
- › **Full surrender of individual policy segment(s)**

Amount	<input style="width: 95%;" type="text"/>
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Enter a range, for example '1 to 5', or choose a value for which Utmost International will calculate the appropriate number of policies for surrender. We will encash whole policies as close to the value needed, and then we will partially encash the remaining policies to achieve your requested amount.

Range	<input style="width: 60%;" type="text"/>	to	<input style="width: 60%;" type="text"/>	OR	Value	<input style="width: 95%;" type="text"/>
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If you do not have the cash available you must sell from your assets to fund the requested surrender. Please provide as much information as possible in the following section, for example, number of units or value to be sold.

Following a request to fully surrender your policy, the life assurance associated with the policy will stay in force and be charged for until the date that the total surrender benefit is paid to you.

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SALE OF SPECIFIC ASSETS TO FUND REQUESTED PARTIAL ENCASHMENT

See guidance notes for more information.

Please state in the space below which specific asset(s) held in your policy should fund your requested surrender or withdrawal. Please clearly indicate below the percentage of each asset to be sold.

Please note that if a percentage is selected, this will be accepted as a percentage of the total withdrawal amount.

If you wish to add more assets to be sold, please photocopy this page and then complete and attach the details with this form and tick here

FULL NAME OF ASSET AND/OR CASH/TRANSACTION ACCOUNT INCLUDING CURRENCY	ASSET IDENTIFIER (ISIN)	% OF WITHDRAWAL (TO TOTAL 100%)	OR	SELL ASSET IN FULL (PLEASE TICK)
		%		
		%		
		%		
		%		
		%		

REGULAR WITHDRAWALS (not permissible for Life Insurance Portfolio)

This section is to be completed if you wish to make a regular withdrawal by way of a partial surrender from your policy. Please see guidance notes for more information.

Please indicate the amount or percentage of your premium(s) to be withdrawn each year.

Please note all payments will be made in the currency in which the policy was originally invested.

Amount (per annum) OR Percentage of premiums (per annum) %

Please choose the frequency of the withdrawal Monthly Quarterly Half-yearly Yearly

Date of first withdrawal

Please nominate an asset using the table below. You only need to complete this table if you have chosen not to appoint an authorised custodian.

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

ASSET(S) - (TO BE SOLD SPECIFICALLY TO COVER THE REGULAR WITHDRAWALS). PLEASE ENSURE AN ASSET IS NOMINATED OTHERWISE IT WILL LEAD TO YOUR WITHDRAWAL BEING REJECTED. (PLEASE INCLUDE SEDOL/ISIN/UIID)	PERCENTAGE OF ASSETS - TO TOTAL 100%

D PAYMENT DETAILS

MANDATORY

Please see the payment details section of the guidance notes before completing this part of the form.

Please make sure this section is completed in clear BLOCK CAPITALS. As your payment is to be sent by telegraphic transfer a bank charge will apply.

BANK DETAILS OF THE PAYEE

Account name

Account number

Bank sort code

Building Society roll number (if applicable)

Bank BIC/Swift code (required for all banks outside the UK)

IBAN

Name & address of bank

 Postcode

How long has this account been held? Years

Please note an intermediary SWIFT code is required when making international payments in a currency that is not locally used by the recipient bank. If this is in line with your request, please provide the intermediary SWIFT code for your bank. You may need to contact your bank to obtain this information.

Intermediary SWIFT code

Please tick here if you want to proceed without the intermediary SWIFT code.

Payment reference

If payment is to be split, please complete the section below:

Please indicate the capacity in which the payee will be receiving the payment.

Policyholder Beneficiary Financial Institution, Financial Adviser, Solicitor or Accountant client money account

If you do not complete this section and the currency of your payment is not locally used by the recipient bank, we will need to contact you to request the intermediary SWIFT and this could delay the payment.

BANK DETAILS OF SECOND PAYEE (IF APPLICABLE)

Account name

Account number

Bank sort code

Building Society roll number (if applicable)

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Bank BIC/Swift code
(required for all banks
outside the UK)

IBAN

Name & address of bank

 Postcode

How long has this
account been held? Years

Please note an intermediary SWIFT code is required when making international payments in a currency that is not locally used by the recipient bank. If this is in line with your request, please provide the intermediary SWIFT code for your bank. You may need to contact your bank to obtain this information.

Intermediary SWIFT code

Please tick here if you want to proceed without the intermediary SWIFT code.

Payment reference

If payment is to be split, please complete the section below:

Please indicate the capacity in which the payee will be receiving the payment.

Policyholder Beneficiary Financial Institution, Financial Adviser, Solicitor or Accountant client money account

If you do not complete this section and the currency of your payment is not locally used by the recipient bank, we will need to contact you to request the intermediary SWIFT and this could delay the payment.

E AUTHORITY OF POLICYHOLDER(S) REQUESTING THE PAYMENT MANDATORY

SIGNATORIES - all policyholders, including additional trustees and/or pledgee/assignee where applicable, must sign below. Please indicate the capacity in which you are acting.

The undersigned as policyholder (each policyholder if the policy is owned jointly) hereby:

- › Authorises and requests Utmost International to carry out the transaction detailed in Section C in accordance (where applicable) with Utmost International's relevant Terms and Conditions
- › Confirms that all the information contained in this document is true and correct and that the payee(s) are entitled to the legal and/or beneficial interest in the policy unless for example the policy is subject to a trust or nomination and the beneficiaries are entitled to receive payment in accordance with the trust/nomination provisions
- › Confirms that there is no Bankruptcy Order against the policyholder or beneficiary nor are they an undischarged bankrupt or deemed to be insolvent under any relevant insolvency legislation
- › Undertakes to indemnify Utmost International against any claims or demands made by any other person or party as a result of the payment requested in Section C
- › Agrees that payment of the partial or full surrender proceeds shall constitute full discharge of the liability of Utmost International
- › Confirms they understand that the Sum Assured may be reduced following the request to partially or fully encash the policy
- › Confirms that they understand that following a request to fully encash the policy, the life assurance associated with the policy will remain in force and be charged for until the date that the total surrender benefit is paid to you.
- › **Confirms that by fully/partially encashing the policy the policyholder(s) have read and understood the guidance notes attached to this form, have sought and considered financial advice in regards to the potential tax consequences and have referred to the relevant policy terms and literature.**

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.

DATA PRIVACY STATEMENT

Our Privacy Notice 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 on our website www.utmostinternational.com/privacy-statements or you can contact our Customer Service Team on 0845 602 9281 and request a copy.

F REASONS FOR REQUEST **MANDATORY**

1 Nature and purpose for the original investment

Succession Planning Retirement Planning

Other

For example: life assurance, wealth accumulation, inheritance planning, etc.

2 Reason for surrender / withdrawal?

For example: fund performance, charges, poor customer experience, change of circumstances, alternative investment, need access to funds for loan repayment, property investment, etc.

3 Did you seek financial advice on this surrender / withdrawal? Yes No

	Signatory 1	Signatory 2																
SIGNATURE																		
Full name																		
Capacity	Individual Trustee Pledgee Other	Individual Trustee Pledgee Other																
Date	<table border="1" style="width: 100%; border-collapse: collapse;"> <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="width: 100%; border-collapse: collapse;"> <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											

	Signatory 3	Signatory 4																
SIGNATURE																		
Full name																		
Capacity	Individual Trustee Pledgee Other	Individual Trustee Pledgee Other																
Date	<table border="1" style="width: 100%; border-collapse: collapse;"> <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="width: 100%; border-collapse: collapse;"> <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											

IMPORTANT INFORMATION ON PROCEEDS AND PAYMENT

The following will define the type of policy you hold with Utmost International:

- › Portfolio Bond - All references to 'Portfolio Bonds' in this document mean your single premium contract.

When encashing or making one-off withdrawals, it's important to consider that:

- › You may have to pay tax if you withdraw or surrender from your policy. Therefore we strongly recommend you consult with your financial adviser/financial adviser representative before completing this form.
- › You may incur early encashment charges. Therefore we strongly recommend you ask for an approximate calculation of the surrender value before completing this form.
- › You may incur set up costs if you move your assets to a new provider.

How can we send you the policy proceeds from encashment?

- › Payments will be made in the currency in which the policy is denominated. However, for all portfolio bond products, an alternative currency may be specified. You can ask for your payment to be made in a different currency, in accordance with Policy Terms. Refer to Section C.
- › If you ask for the payment to be sent to the beneficiary/beneficiaries of a trust you should be aware we will require certified ID and proof of the residential address of the beneficiary/ies, if not already provided, in order to prevent delays in processing the payment.
- › No third party payments are allowed.
- › If you are taking a part surrender, full surrender of individual policy segment(s) or regular withdrawal (if permissible), a surrender value of £10,000 (or currency equivalent) or 15% of the overall premiums received (whichever is higher) must remain in the portfolio bond. If the value of the portfolio bond drops below this level, we may ask for additional premiums or request that you surrender the portfolio bond. Therefore it is a good idea to leave a value above this limit as market or exchange rate fluctuations can affect residual values.

When you are ready to request a payment, what should you do?

- › Please return the completed form(s) and any title or other documentation where applicable, to:
Utmost International Isle of Man Limited, King Edward Bay House,
King Edward Road, Onchan, Isle of Man IM99 1NU, British Isles
Fax: +44 (0)1624 611 715
Email queries: IOMpaymentsout@utmostgroup.com

A POLICY DETAILS

In this section you should enter the policy number from which you wish the payment to be made. Please confirm whether this is a request from an individual, trustee or corporate policyholder by ticking the relevant field. If the policyholder is a trust please fill out the name of the trust and the date that it was created. If the policy is in the name of a corporate investor please enter the corporate name in the space provided. If the policyholder is an individual(s) please enter the full name(s) in the space provided. You then need to give the address details of the policyholder(s).

B POLICYHOLDER DETAILS

FINANCIAL ADVISER REPRESENTATIVE DETAILS

Please complete the company name, adviser name, contact number and e-mail address of your financial adviser representative.

THIRD PARTY/PLEDGEE/ASSIGNEE DETAILS

Please give the name of any third party to whom the policy has been pledged or with whom the policy schedules may have been deposited or otherwise charged as security. If this applies please also ensure that section D is also signed by the third party.

DETAILS OF NOMINATION

Please provide the details of any nomination noted on the Policy.

If the Policy is subject to an Irrevocable Trust Nomination, the encashment proceeds can be paid to:

- a. The trustees jointly; or
- b. if there is more than one, then any trustee provided it is not the policyholder; or
- c. any beneficiary, up to the share allocated to them, provided the nominee is at least 18 years of age. If the beneficiary is a minor then Utmost International can pay to the parent or legal guardian of the minor beneficiary; or
- d. the personal representatives of the Estate of any deceased nominee.

If the Policy is subject to a Revocable Nomination, the encashment can be paid to the Policyholder.

C PAYMENT OPTIONS

ENCASHMENT DETAILS

In this section please choose the currency in which you would like your payment to be received (if you choose a currency which is not the currency of your policy, currency dealing charges may apply).

We accept the following currencies:

British Pound (£), US Dollar (US\$), Euro (€), Hong Kong Dollar (HK\$), Swedish Krona (SEK), Swiss Franc (CHF), Singapore Dollar (SGD), Norwegian Krone (NOK), New Zealand Dollar (NZD), Japanese Yen (JPY), Canadian Dollar (CAD), Danish Krone (DKK) and Australian Dollar (AUD).

Please choose the type of encashment that you require from the options:

› **Full surrender of all policies**

This is the sale of all assets into the policy currency (unless you advise us otherwise) and the encashment of all policies.

› **Identical part surrenders from all policies to release a total sum (withdrawal)**

This is to request a specific amount by cashing in an equal amount across all policies. Please indicate which assets you want us to sell in order to fund your requested surrender.

› **Full surrender of individual policy segment(s)**

This is the full surrender of a specific policy segment. Please indicate which assets you want us to sell in order to fund your requested surrender.

Sale of specific assets to fund requested partial encashment

This section must be completed for all portfolio bond products to fund the partial encashment you have requested. Please note this will not include overdrawn balances.

Regular withdrawals

The minimum payment for any withdrawal, regardless of frequency is:

SILK Life Plan and Tailored Life Plan: US\$3,750, SG\$5,000, £2,500 (or other currency equivalent)

No regular withdrawals are permissible for Life Insurance Portfolio.

- › If payment is in Sterling to a UK bank account we will endeavour to pay it by BACS transfer as this does not involve a bank charge and can take up to three working days to reach your account once paid. However, if we are unable to do this we will send by telegraphic transfer which will incur a bank charge of £12 (or other currency equivalent).
- › Percentages withdrawn will be based on the premium(s) received prior to this request. If you require the percentage to include any additional funds received in the future, we will require revised instructions to this effect at that time.
- › Should the value of the specific asset(s) you have specified fall to zero, then in the absence of alternative instructions your income will cease.
- › Please note that the sale of each asset may be subject to a dealing charge and sometimes also third-party charges.
- › All regular withdrawals can only be made in the original currency denomination of the portfolio bond.

In all circumstances we suggest that you seek financial and tax advice before submitting any request for payment to ensure you are aware of any tax consequences as a result of the encashment from your policy.

D REASON FOR REQUEST

In order for us to continuously improve our products and services we appreciate any feedback that we receive. If you have any other comments or suggestions, you can write to us at Utmost International, King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles or email IOMpaymentsout@utmostgroup.com

E PAYMENT DETAILS

- › Payments can be made to parties who are connected to the Policy.
- › Payment will be sent to your bank account by telegraphic transfer and bank charges will be incurred unless the transfer is a regular withdrawal in Sterling made by BACS transfer.
- › For joint policies, payment will be made to both policyholders, either in full to a joint bank account or split equally to bank accounts in each of the policyholders' names (please use section C to provide the second policyholder's bank details if applicable).
- › All payments on corporate policies will be made payable to the company.
- › All payments to banks within Europe and the Middle East require a BIC/SWIFT and an IBAN. **Please ensure that these fields are filled in as it may delay your payment without this information.**

F AUTHORITY OF POLICYHOLDER'S REQUESTING THE PAYMENT

All policyholders, including additional trustees and/or assignees where applicable, must sign this section. Please also indicate the capacity in which you are acting. These signatures authorise and request Utmost International to effect the transaction(s) detailed on this form.

By signing this form you confirm that you have read and understood the policy terms and conditions and these guidance notes on making a payment from the policy.

A WEALTH *of* DIFFERENCE

www.utmostinternational.com

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

Utmost Wealth Solutions is the registered business name of Utmost International Isle of Man Limited Singapore Branch.
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Registered in Singapore Number T08FC7158E. Authorised by the Monetary Authority of Singapore to conduct life assurance business in Singapore.
Member of the Life Insurance Association of Singapore. Member of the Singapore Finance Dispute Resolution Scheme.

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