

# APPLICATION FORM - NEW BUSINESS AND TOP-UP

For Accredited Investors - Individual, Joint, Corporate and Trustee Investors

**WARNING:** PURSUANT TO SECTION 23(5) OF THE INSURANCE ACT 1966 OF SINGAPORE, AS MAY BE AMENDED FROM TIME TO TIME, IF YOU DO NOT FULLY AND FAITHFULLY DISCLOSE IN THIS APPLICATION FORM ALL FACTS WHICH YOU KNOW, OR OUGHT TO KNOW, THE POLICY ISSUED MAY BE VOID AND YOU MAY RECEIVE NOTHING FROM THE POLICY.

#### THIS DOCUMENT WAS LAST UPDATED IN FEBRUARY 2024.

Please confirm with your financial adviser representative that this is the most up-to-date document for your product or servicing 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	
B1 Individual/Joint/Non-Corporate Trustee Applicant(s)	5	
B2 Corporate/corporate trustee applicant	7	
B3 Details of the trust - this section refers to trustee applicants	8	
B4 Beneficial Ownership	8	
B5 Politically exposed person - this section applies to all applicant types	9	
C Details of any additional life/lives assured (if different from applicant(s))	9	
D Source of Funds - Bank details of where funds are being remitted from	10	
E Investment details	11	
F1 How assets are managed	12	
F2 Asset choice to invest with our default custodian	14	
G Source of Funds	15	
H Regular withdrawals (optional)	21	
I Number of policies	21	
J1 Appointment of an investment adviser representative Client agreement - to be completed by the applicant(s)/policyholder(s)	22	
J2 Acceptance of appointment - to be completed by the investment adviser representative	24	
K Utmost International charges	25	
L Declaration and application	26	

SECTION		PAGE	COMPLETED
M1 Verification of customer ider this section applies to all ap	ntity - financial adviser representative/suitable certifier to complete plicant types	- 31	
	ntity - financial adviser representative/suitable certifier to complete on corporate trustee applicants	33	
	ntity - financial adviser representative/suitable certifier to complete orporate/corporate trustee applicants	- 34	
N Financial adviser representa	tive/Suitable certifier	35	
CUSTOMER ID NUMBER	(S)		
If known please enter the Custon	mer ID number(s)		
Applicant 1	Applicant 2		
FINANCIAL ADVISER RE	PRESENTATIVE		
Utmost International Adviser ID			
MAS representative number			
Name of financial adviser representative			
Company name			
Address			
Telephone numbera	Fax number		
E-mail address			

Utmost International only accepts business introduced by companies which have Terms of Business with us.

We only sell our products through financial adviser representatives as we believe it is important you receive independent financial advice. As it is you who chooses your financial adviser representative, you need to bear in mind that they are acting on your behalf and not on behalf of Utmost International. You are responsible for their actions or omissions.

The Executive Investment Account is issued by Utmost International Isle of Man Limited Singapore Branch on behalf of Utmost International Isle of Man Limited. All references to **Utmost International, we, us** and **our** in this application form mean Utmost International Isle of Man Limited.

#### Important taxation information

Under Automatic Exchange of Information (AEOI) regulations, Utmost International 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 promptly so we can determine if a new self-certification is required.

#### Important information for you - the applicant

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.

3 | 36

This application form should be read together with the Policy Terms, Confirmation of Charges, Product Summary and Product Brochure, which are available from Utmost International. You will also need to read Your Guide to Life Insurance and the Code of Life Insurance Practice (the latter two documents can be downloaded from the Life Insurance Association's website: www.lia.org.sg).

Please note this application form should not be used by applicants residing/incorporated in Hong Kong or the United States of America or its territories, as there is alternative local product available and marketed in the relevant jurisdiction or where Utmost International 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 receive and read through the relevant product information:

- > Executive Investment Account brochure
- > Executive Investment Account product summary
- Executive Investment Account policy terms & conditions SO1

For ease of reference we have used an arrow ▶ to highlight certain facts.

#### Online service account on Wealth Interactive

When you apply for your Executive Investment Account, we will automatically set you up with an Online Service Account on our Wealth Interactive service. You will receive an e-mail 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.

#### For trustee applicant(s)

Please ensure that the trust deed provisions allow delegation of trustees' powers to one trustee only, and for corporate trustees the articles of association permits the company to delegate approval on behalf of the company to one authorised signatory or there has been a board resolution that confirms that one authorised signatory has authority to act on behalf of the corporate trustee solely, later referred to as the Lead Policyholder.

If delegation is not allowed then you MUST opt to transact with us and receive communications from us by post rather than online. Please tick if applicable ( $\checkmark$ ).

#### For corporate applicant(s)

Please ensure that your memorandum of association permits the company to delegate approval on behalf of the company to one authorised signatory, later referred to as the Lead Policyholder.

If delegation is not allowed then we recommend that the company opt to transact with us and receive communications from us by post rather than online.

If the company would prefer to receive communications from us by post rather than online, please tick here  $(\checkmark)$ .

#### Free look provision

You have the right to cancel your Executive Investment Account 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 Executive Investment Account. 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 Executive Investment Account Terms & Conditions.

\* Where relevant, applicable charges include non-refundable fund charges, fees we have paid to your financial adviser representative 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; any amendments should be crossed out and initialled by all applicants (authorised signatories of the company or corporate trustee, if applicable).

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.

ULQ PR 09303 | 02/24

ULQ PR 09303 | 02/24

A TYPE OF APPLICAT	ION					
Type of client, please tick (✔)						
Individual Joint	Corporate	Non-co	orporate Trus	stee (Ind	ividual/Joint)	Corporate Trustee
New investment						
If this is an application for a NE	W INVESTMENT,	please tick here	<b>(</b> ✓).			
Additional Investment						
If this is an application for an Al existing policy number: (you ca				ur [		
▶ Unless your details have char of each policyholder in section (if applicable) in section C. YOU	B1 or Company n	ame in B2 and f	full forenam	e(s) and	surname of each li	
Policy currency						
I wish my policy to be valued in	( <b>✓</b> ) S\$	S US\$	€	£	Other (state currency)	
Please note if no currency is entafter the policy is set up.	tered your policy	currency will be	US dollars (	(US\$). T	he policy currency o	cannot be changed
Reason for investment (e.g. saving for retirement)						
Lead policyholder for online se	ervice accounts					
For trustee/corporate applicant not permit the delegation of approceed to section B.						
For joint applicants (Each applic	cant must agree to	select the same	e Lead Polic	yholder.	)	
We, the applicant(s), appoint (insert name in the box)						
to act as the Lead Policyholder f	or policies compri	ising our Execut	ive Investme	ent Acco	ount in accordance v	with the Policy Terms.
The specific email address* which will be used for the Online Service Account is						
For corporate applicants						
Under appropriate authority the online on behalf of the company Policyholder then it is not necessame Lead Policyholder.	y. If this is not the	first application	for this com	pany Al	ND the company alr	eady has a Lead
The company appoints (insert name in the box)						
to act as the Lead Policyholder fo	or the policies con	nprising our Exe	cutive Invest	tment A	ccount accordance	with the Policy Terms.
The specific email address* which will be used for the Online Service Account is						

For trustee applicants

4 | 36

If you are a corporate trustee, do to all the members?	o you want to of	fer our Online Se	rvice Accoun	t, Wealth Interactiv	ve, Ye	es No
If allowed by the provisions of tl association, one of the trustees The declaration on page 30 sets	must be appoint	ted as the Lead Po	olicyholder a	trustees if also per nd all trustees mus	mitted in the arti st agree to this a	cles of ppointment.
We, the trustee(s), appoint (insert name in the box)						
to act as the Lead Policyholder fo	or the policies co	mprising our Exec	utive Investm	nent Account in acc	cordance with the	Policy Terms.
The specific email address* which will be used for the Online Service Account is						
* Please note each person must h	nave a unique em	nail address. An en	nail address o	cannot be shared b	y users on Wealth	n Interactive.
B1 INDIVIDUAL/JOINT	Γ/NON-COR	PORATE TRU	STEE APP	CLICANT(S)		
In this section, please give detai	ils of all individu	al applicant(s). Ap	plicants mus	st be at least 18 ye	ars old and the r	naximum
The maximum age for a life assu	ured is 89.					
If there are any further applican form and tick here (✓)	nts, please photo	ocopy this section	, attach the o	details with this ap	plication	
▶ If additional pages are added	d, each separate	page must be in	itialled by al	l applicants.		
	Applicant 1			Applicant 2 (if	fany)	
Title (✔)	Mr	Mrs	Miss	Mr	Mrs	Miss
	Other			Other		
Full forename(s)						
Surname						
Maiden name, previous name or alias						
Relationship to first applicant						
Sex(✔)	Male	Female		Male	Female	
Date of birth	d d m m	у у у у		d d m m	у у у у	
NRIC/FIN number						
Nationality						
Dual nationality (if applicable)						
Passport number						
Expiry date	d d m m	у у у у		d d m m	у у у у	
Country of issue						
Country of residence						

ULQ PR 09303 | 02/24 5 | 36

Residential address (where you are currently living, we do					
not accept PO Box or C/O					
addresses)	Postcode		Postcode		
Correspondence address					
			Postcode		
Utmost International accepts no raddress, or to an address notified residential address where regular	l subsequently. U	tmost International reserves	ng documenta s the right to s		
Telephone number including area code (daytime)					
Mobile number including area code (Please note each applicant must provide valid					
mobile number)					
E-mail address (Please note each applicant must have a unique e-mail address. An e-mail address cannot be shared by users on Wealth Interactive.)					
Is the applicant(s) also going to	Yes	No	Yes	No	
be a life assured? (🗸)  There must be an insurable interest.	ast hatwaan tha	annlicant and the life assure	ad where the	applicant wou	uld suffer loss in the
event of the death of the life assi		applicant and the me assure	ou where the	applicant woo	na sanci 1035 in the
Employment details					
For additional investment, if you please tick here. $(\checkmark)$	r employment de	etails have not changed sinc	e the last app	lication,	
Please give details of your emplo employed please include details please state N/A.					
Please also enter your final year's	salary/income a	nd bonus if any.			
	Applicant 1		Applicant	· 2 (if any)	
Employment status (✓)	Employed	Self Employed		ployed	Self Employed
	Retired	Not Employed	Reti	red	Not Employed
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)					
Name of employer or your own company					
Start date with current/last employer or your own company	d d m m	y y y y	d d m	n m y y	уу

Address of employer or your own company									
	Postcode					Postcode			
Country									
Employer's phone number									
Employer's e-mail address									
Website address of employer or your own company (if any) Last year's gross salary/income					] [				
Currency (✔)	S\$	US\$	€	£		S\$	US\$	€	£
	Other (s	tate currer	ncy)			Other	(state curre	ncy)	
Last year's bonus amount (if applicable)									
Currency (✓)	S\$	US\$	€	£	-	S\$	US\$	€	£
	Other (s	tate currer	ncy)			Other	(state curre	ncy)	
If you receive income from another source, please provide full details here (e.g. dividend, investment, rental income including their nature and source)									
B2 CORPORATE/CORPO	ORATE TRU	STEE A	PPLIC <i>A</i>	NT					
In this section, please give details	of the corpor	ate applica	ant.						
Corporate applicant									
Please tick (✔)	Private o	ompany	Pι	blic comp	any	Other			
Company name									
Contact person									
Country of registration									
Date of incorporation	d d m m	у у	у у						
Registered office address (This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses)	Postcode								
Correspondence address									
					Po	stcode			

ULQ PR 09303 | 02/24 7 | 36

address, or to an address notified	esponsibility for the consequences of sending documentation to this correspondence subsequently. Utmost International reserves the right to send correspondence to a ions prevent it being sent to a third party.
Telephone number including area code (daytime)	
E-mail address (Please note each person must have a unique email address. An email address cannot be shared by users on Wealth Interactive.)	
Corporate website address	
Please state the company's main business (for example manufacturing or trading company)	
Authorised signatories	
Please confirm the minimum num	ber of authorised signatories for the company needed to give instructions.
The company directors/authorise	d signatories of the company must complete and sign the declaration in Section L.
► Additional documents are need director of the company.	ded to evidence the identities of at least two directors, one of whom must be an executive
B3 DETAILS OF THE TR	UST - THIS SECTION REFERS TO TRUSTEE APPLICANTS
	owing details: the name of the trust (for example, 'the Mary Jones Policy Trust dated I Trust') and the date the trust was created on.
The trust was created on	d d m m y y y y
Trust details	
▶ Please explain the reason for establishing the trust, the type of trust it is and detail the source of the trust assets and the country of origin.	
B4 BENEFICIAL OWNER	SHIP
Terrorism - Life Insurers, means th	n MAS Notice 314, on Prevention of Money Laundering and Countering the Financing of e natural person who ultimately owns or controls the customer or the natural person on re established, and includes any person who exercises ultimate effective control over a t.
Are you the ultimate beneficial owner of the Policy (✔)	Yes No
If "No", please provide details of t	the beneficial owner(s) below and provide valid proof of identity for each beneficial owner.
	NOT a nomination of beneficiary(ies) under the Policy.
Name (as shown in NRIC/ Passport/ FIN)	
NRIC/Passport/ FIN No.	

Date of birth	d d m m	у у у у				
Relationship to the Policyholder						
Gender (M/F)						
Residency status (Singaporean/Singapore PR/ Pass holder/Other) Nationality (if not Singaporean)						
If there are two or more benefic	cial owners phot	ocopy the relevar	t pages and	l attach securely to	this form.	
B5 POLITICALLY EXPO	SED PERSO	N - THIS SEC	TION AP	PLIES TO ALL	APPLICAN	T TYPES
If the applicant(s) or any other p politically exposed person (PEP)					e could be clas	sed as a
A politically exposed person is s Examples of these are:	someone holding	g an important pu	olic position	, or a person clear	ly related to the	em.
Heads of State or Government	› Senior C	Government officia	ls > Se	enior executives of	publicly owned	l corporations
> Senior politicians	› Judicial	or military officials	· · In	nportant political o	fficials.	
regulatory requirements relating provided using the Source of W	ealth Questionn	naire, and may als	require So	urce of Wealth evi	dence.	
Please note you do not need to The maximum age for a life ass		ection if the appli	cant(s) is/are	e going to be the o	only life/lives as	sured.
If there are any further lives assuform and tick here ( $\checkmark$ )	ıred, please pho	tocopy this page,	attach the d	etails with this app	lication	
▶ If additional pages are added	l, each separate	page must be initi	alled by all a	applicants.		
There must be an insurable inte event of the death of the life as		e applicant and th	e life assure	ed where the appli	cant would suf	fer loss in the
	First additiona	al life assured (if a	ny)	Second additi	onal life assure	d (if any)
Title (✔)	Mr	Mrs	Miss	Mr	Mrs	Miss
	Other			Other		
Full forename(s)						
Surname						
Maiden name, previous name or alias Relationship to first applicant						
Sex (✔)	Male	Female		Male	Female	

ULQ PR 09303 | 02/24 9 | 36

Date of birth

Residential address (where you are currently living, we do not accept PO Box or C/O addresses)	
Country of residence	Postcode Postcode
Nationality	
Dual nationality (if applicable)	
NRIC/FIN number	
Relationship to applicant	
D SOURCE OF FUNDS	S - BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM
This section must be completed	
-	v investment, this section must be completed in full in all instances.
For additional investment, if the and indicate the payment amou	source of funding is the same as the last application, please tick here nt and currency only. ( $\checkmark$ )
► The premium payment must o	come from an account held in the name of the applicant(s), company or trust.
	yments, please photocopy this page, attach the details and the reason ${f g}$ made with this application form and tick here. ( $\checkmark$ )
Payment amount	Payment currency
Bank account holder (name as stated on bank account)	
Bank account number/IBAN	
Sort code (if applicable)	
SWIFT or BIC code (if applicable)	
Bank name	
Bank address	
	Postcode
Country	
How long have you held this account?	years months
	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).

LAL	V/E C 7		1 -	$rac{1}{2}$	A 1.1	
	$V \vdash S$	IME1	N I I	) F I	$^{L}$	- 5

▶ Please refer to the end of this application form for bank details and payment methods.

<b>D</b> .		
Premium	กลง	/ment
Ciiiiaiii	Pu	,

Premium payment						
Please confirm the total amou currencies, please state the to						and in different
Currency (✓)	S\$	US\$	€	£	Other (state currency)	
Total anticipated investment a (Minimum initial investment: S €75 000 or currency equivaler (Minimum additional investme €7,500 or currency equivalent	\$\$100,000/ US\$7 ht) ent: S\$10,000/ U	,		Amount	t	
Payment method (🗸)	Electro	nic bank trar	nsfer	Ass	et transfer	
Where you have chosen an au	ıthorised custodi	an, are you r	emitting y	our premiu	m to be paid: (✔)	
to Utmost International;	or	via th	ne authoris	sed custodia	an	

- ▶ The premium payment must come from an account or transferred assets held in the name of the applicant(s)/company/ trust.
- ▶ Please remember to enclose either a copy of receipt of your electronic bank transfer payment (for banking details see bank details and payment methods at the end of this application form) or your asset transfer form (your financial adviser representative can provide you with the necessary details) with this application form.

#### Warning

It is usually disadvantageous to replace all existing life insurance policies with a new one. Some of the disadvantages include:

- You may incur transaction costs without gaining any real benefit from the switch.
- The new investment product may offer a lower level of benefit at a higher cost or the same cost, or offer the same level of benefits at a higher cost.
- iii. You may incur penalties for terminating the existing investment product.
- iv. The new investment product may be less suitable for you.

In your interest, we would advise that you consult your financial adviser representative before making a final decision.

If you sent in a premium with the application, we will offer you a refund of the premium in the event that you were not aware of the disadvantages of replacing one policy with another and do not wish to proceed with the application.

#### Replacement of life policies

Is this policy to replace or intended to replace any insurance(s) or other Designated Investment Product(s), such as a unit trust or life policy, held with another financial institution including insurance companies and banks?

Yes	No

If 'Yes' please provide the following details;

- > Name of existing policy/product replaced (to be replaced) and the relevant financial institution.
- > Reason for replacement policy.
- > Surrender penalty incurred.
- > Length of time the existing policy/product held.

ULQ PR 09303 | 02/24

#### Declaration

I confirm that I have consulted my financial adviser representative before making a final decision to proceed with this application who has made me aware of the disadvantages of replacing my old life Policy with a new one and I am happy to proceed with this application.

**Signature of applicant(s)** (If two applicants, both must sign. If there are more than two applicants, please continue on a separate sheet.)

	first or sole applicant	second applicant
SIGNATURE		
Full name		
Date	d d m m y y y y	d d m m y y y y

#### F1 HOW ASSETS ARE MANAGED

In this section, you will tell us how your policy will be managed. You can request Utmost International to appoint a Discretionary Asset Manager or you can appoint an investment adviser representative to manage the Assets held with each custodian. If you appoint any authorised custodian, you need to complete the 'Request to transfer to an authorised custodian account' form and Letter of Authority (if applicable) which is available from your financial adviser representative.

**Default Custodian** - Assets held by Utmost International

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. 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 an Investment Adviser Representative 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 Investment Adviser Representative 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		PLEASE SELECT THE INVESTMENT MANAGER FOR EACH SELECTED CUSTODIAN		ER FOR EACH
WILL HOLD THE ASSETS.	NAME OF CUSTODIAN	POLICYHOLDER	INVESTMENT ADVISER REPRESENTATIVE	DISCRETIONARY ASSET MANAGER
Default custodian	Default			
Default custodian	Default			
and one authorised custodian				
One authorised custodian				
Two authorised	Lead:			
custodians				
	Lead:			
Three authorised custodians				

#### 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.

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

#### Notes

- 1. A detailed list of any Assets to transfer must be supplied with the application and approved by Utmost International before any transfer takes place.
- 2. If you have selected the default custodian, electronic bank transfers and Asset transfers must be sent to Utmost International.
- 3. If you have selected to use an authorised custodian, Asset transfers must be sent directly to the authorised custodian.

ULQ PR 09303 | 02/24 13 | 36

Total (must add up to 100%)

#### F 2

#### ASSET CHOICE TO INVEST WITH OUR DEFAULT CUSTODIAN

You or your investment adviser representative, if applicable, should provide any future investment instructions online via Wealth Interactive in the first instance. Alternatively, please use this section to list the investments which your premium should be invested in.

Utmost International does not provide investment advice and has no responsibility for the performance of your selection of investments. For individual/joint applicants, it is for you and your investment adviser representative to choose the investments most suitable for you. For corporate/trustee applicants, it is for you and your investment adviser representative and appointed custodian to choose the investment most suitable for you.

You do not need to complete this section if you have appointed an authorised custodian.

▶ Please note that you can invest in as many assets as you wish, subject to a minimum of S\$5,000/US\$3,750/€3750/£2,500 or currency equivalent of £2,500 in each holding. Some asset providers may have a higher minimum investment requirement and this minimum will prevail.

Please note that we will allocate the premium to the cash transaction account if this section is left blank.

A delay in investing your premium may occur if the instructions are illegible, unclear or relate to an asset which is not normally permitted. Please note that we are unable to backdate transactions resulting from the delay caused in clarifying your instructions.

#### Investment choice

SECURITY IDENTIFIER SEDOL/ISIN NUMBER	SECURITY/FUND NAME - PLEASE ENTER NAMES IN FULL.	ACCUMULATION/ INCOME UNIT REQUIREMENT (IF APPLICABLE)	SHARE CLASS (IF APPLICABLE, FOR EXAMPLE A, B OR C)	BASE CURRENCY OF SECURITY/ FUND (EG GBP, USD)	INVESTMENT % (WHOLE % NUMBERS ONLY)
					%
					%
					%
					%
					%
					%
					%
					%
					%

#### Investment restrictions

All assets required shall either be quoted on a stock exchange recognised by Utmost International or be specifically agreed by Utmost International as eligible to be purchased for the portfolio fund.

Any assets purchased in respect of your portfolio fund will be purchased at the open market buying price as shown on the contract note used by the vendor or stockbroker.

All assets are held in the name of Utmost International by our default custodian and all dealing and contract notes must be made and rendered in the name of Utmost International.

In the absence of complete investment instructions, or if a selected asset is not available, Utmost International will hold part or all of the premium in the transaction account which forms part of the portfolio fund.

In case we need to clarify the investment choice details above, please provide us with a contact name and telephone number.

Contact name		
Telephone number including area code (daytime) Telephone number including area code (evening) E-mail address	Fax number	
area code (evening)		

#### G SOURCE OF FUNDS

#### Activity which generated amount to be invested

Utmost International 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.

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).

ULQ PR 09303 | 02/24

#### a. Accumulated Earned income (including salary, bonus and fees)

Total amount received	Currency:		Amount:		evidenc
Number of years income accumulated	У	ears ears			clarified section, provide
Institution holding the funds					Origina
Name of account where funds have been held					of one of Last th
Account number					> Three
Length of time funds have been in this account	У	ears	moi	nths	statem income
Nature of business					emplo
Main occupation during the accumulation period (e.g. Director. If you have retired					annual and, w payme
please include your occupation before retirement. Please check					Tax sta UK, IR
that the occupation is not on our list of prohibited documents as confirmed on our Source of Wealth and Source of Funds					· Copy o emplo
Guidelines Main employer's name					
Employer's address					
	Postcode				
Average annual salary over the accumulation period	Currency:		Amount:		
Average annual bonus over the accumulation period	Currency:		Amount:		
b. Compensation					If there
Name of organisation or individual that paid compensation					evidence clarified section,

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of one of the following:

- > Last three month's payslips; or
- Three months of account statements showing declared income being credited; **or**
- Letter on headed paper from employer confirming last year's annualised earned income; and, where applicable, bonus payment or
- Tax statement e.g. P60 for the UK, IRAS for Singapore etc.; **or**
- Copy of latest accounts if selfemployed

Name of organisation or individual that paid compensation

Reason for compensation

Country compensation was awarded

Total amount received Currency: Amount:

Date of received

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- > Letter on company headed paper or court order from compensating body validating the information in the application form; **or**,
- Signed letter on company headed paper from solicitor/lawyer handling the compensation validating the information in the application form

#### c. Competition win

Name of competition organiser			
Description of competition			
Country competition was held in			
Total amount won	Currency:	Amount:	
Date of win	d d m m y	у у у	

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- A signed letter from the organisation providing the proceeds of the win on letter-headed paper confirming name of winner, date of win and value of winnings; **or**
- of winnings in clients name and referencing the organisation providing the proceeds of the win; **or**
- Media coverage of the win showing name of winner, date of win and value of winnings

#### 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	d d m m y y y y

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copies of **all** of the following:

- A valid identification documentation for the donor (even if it is not coming from their account); and
- Letter from the donor explaining the reason for the gift and source of funds behind the gift; and
- Documentary evidence as to the donor's source of wealth as set out in the Source of Funds and Source of Wealth Guidelines

ULQ PR 09303 | 02/24 17 | 36

#### e. Inheritance

Deceased's full name		If there are documentary evidence requirements, as clarified at the start of this section, you are required to
Relationship to applicant		provide the following
Date of death	d d m m y y y y	Original or suitably certified copy of <b>one</b> of the following:
Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)		<ul> <li>Grant of probate (with a copy of the will) which must include the value of the estate; or</li> </ul>
Amount received	Currency: Amount:	The will relating to the inheritance; or
Date received	d d m m y y y y	<ul> <li>A signed letter from the regulated solicitor dealing with</li> </ul>
Solicitor/lawyer's (who dealt with the estate) name		the estate on letter-headed paper confirming the information
Solicitor/lawyer's firm name		supplied in this application
Solicitor/lawyer's firm address	Postcode	
	rostcode	
f. Loan		If there are documentary
Name of loan provider		evidence requirements, as clarified at the start of this
Address of loan provider		section, you are required to provide the following
		Original or suitably certified copy of <b>one</b> of the following:
Total amount borrowed	Postcode  Currency: Amount:	A signed letter from the lender on letter-headed paper confirming the name of borrower, amount of loan and date of draw-down; <b>or</b> ,
Date of loan	d d m m y y y y	<ul> <li>A loan statement confirming the details provided in this form</li> </ul>

If there are documentary

#### g. Maturing policy/policy claim/replacement policy

If the source of funds is the sale please complete h instead.  Name of policy provider	of an investment rather than maturity,	evidence requirements, as clarified at the start of this section, you are required to provide the following
Address of policy provider		Original or suitably certified copy of <b>one</b> of the following:
	Postcode	<ul> <li>Letter on company headed paper from previous product provider regarding notification of proceeds of claim under the</li> </ul>
Policyholder's full name		policy; <b>or</b>
Length of time policy held	years months	<ul> <li>Closing statement from previous product provider</li> </ul>
need to understand the Source	old has been owned for less than 5 years, we of Funds immediately prior to the purchase complete an additional relevant section to	
Reason for policy claim or replacement policy (if applicable)		
Total amount received	Currency: Amount:	
Surrender penalty (if applicable)		
Date received	d d m m y y y y	
h. Sale of asset portfolio or in	vestment	If there are decumentary
-	ng investment rather than one that you are	If there are documentary evidence requirements, as clarified at the start of this section, you are required to
If the source of funds is a maturi choosing to sell, please complete Description of asset portfolio	ng investment rather than one that you are	evidence requirements, as
If the source of funds is a maturi choosing to sell, please complete	ng investment rather than one that you are	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy
If the source of funds is a maturichoosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company	ng investment rather than one that you are	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:
If the source of funds is a maturic choosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)	ng investment rather than one that you are	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy
If the source of funds is a maturichoosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company that held it  Registered address	ng investment rather than one that you are	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:  Legal sale document; or
If the source of funds is a maturichoosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company that held it  Registered address	ng investment rather than one that you are	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:  Legal sale document; or
If the source of funds is a maturichoosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company that held it  Registered address	ng investment rather than one that you are the g instead.	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:  Legal sale document; or
If the source of funds is a maturichoosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company that held it  Registered address of company	ng investment rather than one that you are the g instead.	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:  Legal sale document; or
If the source of funds is a maturic choosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company that held it Registered address of company  Account name  Length of time asset portfolio or investment held  If the portfolio/investment being select to understand the Source of	ng investment rather than one that you are te g instead.  Postcode  years months  sold has been owned for less than 5 years, we Funds immediately prior to the purchase of the	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:  > Legal sale document; or  > Copy of contract note
If the source of funds is a maturic choosing to sell, please completed Description of asset portfolio or investment (i.e. government bonds, equities etc.)  Name of the company that held it Registered address of company  Account name  Length of time asset portfolio or investment held  If the portfolio/investment being select to understand the Source of	ng investment rather than one that you are te g instead.  Postcode  years months  sold has been owned for less than 5 years, we	evidence requirements, as clarified at the start of this section, you are required to provide the following  Original or suitably certified copy of one of the following:  Legal sale document; or  Copy of contract note

ULQ PR 09303 | 02/24 19 | 36

#### i. Sale of interest in company

Company name	
Business sector	
Address of company	
	Postcode
Your connection with the company For example: owner, partner or shareholder	
Date of sale	d d m m y y y y
Sale amount	Currency: Amount:
Net amount received The amount you have received after any deductions such as fees and taxes.	Currency: Amount:

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

Signed letter on company headed paper from solicitor/ lawyer validating the information confirmed in this section of the application form; or,

- > Signed letter on company headed paper from regulated accountant validating the information in this section of the application form; or,
- > Copy of contract of sale and bank statement in the name of the client showing payment of the proceeds into an account in the name of the applicant; or,
- > Copies of media coverage of the sale (if applicable) as supporting evidence that the information is in this section of this application form

#### j. Sale of property

If you are not the heneficial owner of this property, please select a different

option for source of funds that is Address of property sold (including postcode if	more appropriate
applicable)	
	Postcode
Length of time property owned	years months
understand the Source of Funds	en owned for less than 5 years, we need to immediately prior to the purchase of the ditional relevant section to confirm this.
Date of sale	d d m m y y y y
Total sale amount	Currency: Amount:
Net amount applicant received from sale	Currency: Amount:

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of one of the following:

- > Signed letter on headed paper from solicitor; or lawyer handling the sale or from regulated accountant; or
- > Signed letter on headed paper from estate agent (if applicable);
- > Copy of contract of sale detailing the details included in the application form

ULQ PR 09303 | 02/24 20 | 36

#### k. Other

Description of the activity that generated the funds Role in relation to above activities		evidence rec clarified at t section, you provide the
Period over which the activities occurred		Original or s of <b>one</b> of the
Country in which the activity occurred		<ul> <li>Appropriat</li> <li>supporting</li> <li>which valid</li> </ul>
Date received	years months	provided in application
Proceeds received from the activity	Currency: Amount:	Signed letter with person the activities

If there are documentary evidence requirements, as clarified at the start of this section, you are required to provide the following

Original or suitably certified copy of **one** of the following:

- Appropriate, independent supporting documentation which validates the information provided in this section of the application form; or,
- Signed letter from a person with personal knowledge of the activities described and in a position subject to anti-money laundering regulation, for example a regulated accountant or lawyer

#### REGULAR WITHDRAWALS (OPTIONAL

If you would like to receive regular withdrawals from your Policy, please complete the 'Portfolio Bond Withdrawal/Closure form' which is available from your financial adviser representative.

#### NUMBER OF POLICIES

#### New contracts only

Please enter the number of policies you would like:

#### The number of policies cannot be changed after the Policy is set up.

▶ We normally issue 12 policy schedules per contract. If you require a different number of policies, please insert the number required.

- > The minimum initial investment amount for each individual policy is £500 (US\$750, €750 or other currency equivalent).
- > You can ONLY select more than 12 policies if the investment is over £50,000 (or other currency equivalent) as the minimum investment amount for each policy/account has to be met.
- If you choose a number of policies which results in less than £500 (US\$750, €750 or other currency equivalent) per policy, we will automatically reduce the number of policies to a level where a minimum of £500 (US\$750, €750 or other currency equivalent) per policy is achieved.

ULQ PR 09303 | 02/24 21 | 36

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# AGREEMENT - TO BE COMPLETED BY THE APPLICANT(S)/POLICYHOLI

r representative to your executive investment a	account
<b>Executive Investment Account</b>	
ve details	
	Postcode
	Executive Investment Account

#### Appointment of an investment adviser representative

This Policy allows investment into various types of assets including assets which are only suitable for Professional Investors. If you choose to invest in this Policy, you should ensure that you accept the level of risk associated with Professional Investor assets including the risk that the investment into such an asset:

- a. could provide a lower degree of investor protection and regulatory safeguards; and
- b. could result in a loss of significant proportion of some or all of the sums invested; and
- c. may have a minimum duration, impose significant redemption penalties or be illiquid.

If you do not accept the level of risk associated with these assets, you should inform your Investment Adviser Representative not to invest in assets which are only suitable for Professional Investors. Utmost International will not restrict the choice of assets available under your Policy.

1. I confirm that I, as the policyholder, am legally entitled to effect any of the policy options contained in the policy terms.

#### Basis on which this authority is given (✓) (tick one option only)

2. I appoint and authorise the Investment Adviser Representative to act in the following capacity. Where I have selected:

#### Option 1 - Investment Adviser Representative Authority:

It is agreed that the Investment Adviser Representative will discuss any proposed alternations to the investment composition of the policy with me and obtain my written agreement before any changes are made and I authorise the Investment Adviser Representative to submit written instructions to Utmost International on my behalf.

#### Option 2 - Discretionary Investment Adviser Representative Authority:

It is agreed that all investment decisions have been delegated to the Investment Adviser Representative who has complete discretionary authority, without consulting me to make all investment decisions, to buy or sell assets, hold cash or other investments and I authorise Utmost International to act upon the investment instructions of the Investment Adviser Representative.

- 3. I appoint the Investment Adviser Representative detailed above to act on my behalf in respect of my policy on the basis specified in point (2) above. I understand that the Investment Adviser Representative is not acting on behalf of Utmost International.
- 4. I understand that Utmost International may need to:
  - a. verify the identity of the Investment Adviser Representative;
  - b. verify that the Investment Adviser Representative is regulated by any appropriate regulatory authority; and
  - c. check that they have any qualifications required by law or by regulation for the activity to be carried out.

- 5. I acknowledge and agree that such confirmation is to enable Utmost International to comply with its regulatory duties as an authorised insurer in Singapore. I understand that this is not, and should not be construed as, any endorsement of an Investment Adviser Representative by Utmost International and that Utmost International does not warrant the Investment Adviser Representative's suitability or regulatory credentials.
- 6. I agree that Utmost International is not responsible for any loss or liability to my policy arising from this appointment.
- 7. I confirm that I take full responsibility for the acts or omissions of the Investment Adviser Representative, including any loss in the policy as a result of their acts or omissions (including, but without limitation, failure on the part of the Investment Adviser Representative to produce a reasonable investment return in relation to the policy).
- 8. Further, I for myself and my estate(s) indemnify Utmost International against all claims, demands and actions against Utmost International relating to any such loss suffered. This includes all costs and expenses arising from or in respect of the activities and performance of the Investment Adviser Representative (including, but without limitation, the cost of defending in any court of law any such claim demand or action against Utmost International).
- 9. If Utmost International becomes aware that an Investment Adviser Representative:
  - a. has been refused membership by, or has been expelled from, a professional organisation; or
  - b. is under investigation by, or has been the subject of, disciplinary action by a regulatory authority; or
  - c. has or is carrying out activities in a manner which could prejudice or be harmful to its reputation; then

Utmost International reserves the right to cease to act on the instructions of the Investment Adviser Representative with immediate effect and Utmost International will advise me of the fact.

#### 10. Where I have chosen 'Investment Adviser Representative Authority' Option 1:

- a. I understand that all decisions in relation to the investment strategy and alterations to the investment composition of my policy remain my sole responsibility.
- b. I have agreed with the Investment Adviser Representative that they must:
  - i. discuss any proposed alterations to the investment composition of the policy with me; and
  - ii. have my prior written agreement before any changes are made;
- c. The date instructions are received will be in accordance with the policy terms.
  - i. If Utmost International receives more than one instruction on a given day they will be processed in the order in which they are received.
  - ii. Once the instruction has been received it is irrevocable.
- d. I agree to notify Utmost International in writing of any changes which affect the appointment or authority of the Investment Adviser Representative. I understand that Utmost International will continue to accept my instructions which are sent by the Investment Adviser Representative unless I advise Utmost International of a change in the Investment Adviser Representative's appointment and authority.
- e. I understand that I can terminate the appointment of the Investment Adviser Representative by giving notice in writing to both the Investment Adviser Representative and Utmost International at their Branch Office of the termination of this appointment. The termination will not affect any transactions already carried out or for which binding instructions have been given, directly or indirectly.

#### 11. Where I have chosen 'Discretionary Investment Adviser Representative Authority' Option 2:

- a. I understand that the Investment Adviser Representative has complete discretionary authority, without consulting me, to make all investment decisions to buy or sell assets, hold cash or other investments. I authorise the Investment Adviser Representative to exercise on my behalf any of the options available under the policy terms applicable to my Policy relating to the investment allocations and/or investment conversion.
- b. I confirm that I have delegated all investment decision making to the Investment Adviser Representative.
- c. I understand that Utmost International will act exclusively on an authority once granted until I advise Utmost International in writing at its Branch Office of the termination of this appointment. The termination will not affect any transactions already carried out or for which binding instructions have been given, directly or indirectly.

ULQ PR 09303 | 02/24 23 | 36

#### 12. Investment Adviser Representative fee

r ayment will be base	La on the va	lue of the portfolio fund	at tile last Qu	arterry Date	<b>.</b>		
% a y	/ear						
or							
The set amount	А	year in the following cur	rrency (🗸):	S\$	US\$	€	£
				Other	(state currer	ncy)	
Utmost Internationa	l to withdra	Adviser Representative w an amount from my po ent Adviser Representati	olicy which wil				
c. I understand that th	e Investmen	t Adviser Representative	e fee will be tr	eated as a v	withdrawal fr	rom my p	oolicy.
<b>Signature of applicant(s)</b> (leparate sheet. If additiona							ntinue on a
	first or sole	e applicant		second ap	plicant (if ar	ny)	
SIGNATURE							
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ACCEPTANCE OR REPRESENTATIVE Payment details for investre Payments will be made in the Cayments on which this author. I confirm I hold the Cayments Singapore (MAS) to	DF APPO VE ment advise he currency nority is give relevant auth act in accor	r representative fees and to the bank account n: nority necessary under the	t already held he regulations hent as Invest	on our rec	ords. e to the Moner Represen	etary Au tative.	thority of
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Payment details for investre Payments will be made in the 3. Basis on which this authorisation.  1. Confirm I hold the insurance (MAS) to be I confirm I will remain Representative to the authorisation.  4. Please complete the application I understand that Professional Investigation I confirm that I how investment advices I understand that	ment advise he currency nority is give relevant auti act in accor in authorise propriate se per Represer some of the stors. If the F ssional Inves old the appro e to the polic	r representative fees and to the bank account n: nority necessary under the dance with my appointment d to transact this type of fund. I also confirm I will ection below (	t already held the regulations nent as Invest business whil notify Utmost ant has select roducts allow that they do rese these asset on the Moneta	on our recessapplicables ment Advis st I am action Internation and option 1 investment to twant meas to link to ry Authority	ords.  e to the Moner Represening as the Inventor and of any characteristics.  into assets we to invest interpolicy.  y of Singapo	etary Au tative. restment anges to which are to assets	thority of  Adviser my e only suitable which are on
Payment details for investration and the same and the sam	ment advise the currency the cu	r representative fees and to the bank account n: nority necessary under the dance with my appointed to transact this type of fund. I also confirm I will ection below ( ): ntative Authority (applicate the Utmost International presents then I will not choose opriate authorisation from cyholder(s). rnational can act upon in	t already held he regulations nent as Invest business whil notify Utmost ant has selecte coducts allow that they do n se these asset m the Moneta nvestment ins tive. f the policyho	on our recessapplicables ment Adviss st I am actions and actions and actions are the statement and want meass to link to ry Authority tructions the older(s) to a	ords.  e to the Moner Representing as the Invental of any challof	etary Au tative. restment anges to which are to assets are to pro	thority of  Adviser  my  only suitable which are or  wide ongoine by the

Discretionary Investment Adviser Representative Authority (applicant has selected option 2).

I confirm that I hold a Capital Markets Services (CMS) licence that allows me to provide investment instructions on behalf of the policyholder(s) to Utmost International.

I, the authorised Investment Adviser Representative, confirm and agree that:

- There is an agreement in place ('Terms of Business') that allows the Investment Adviser Representative to make any investment decisions about the policy.
- The Investment Adviser Representative firm is fully responsible to the policyholder(s) for investment decisions, made by the Investment Adviser Representative, on the policy. The investment decisions and the investment choice must comply with the types of investment permitted in the policy terms and the product summary.
- The policyholder(s) has the right to claim directly against the Investment Adviser Representative firm in relation to any act or omissions of the Investment Adviser Representative.

Capital Markets Serv licence number:	vices
Telephone number	
E-mail address	
I have read the Conditions list changes to my/our authority.	ted in this form and agree to act in accordance with them. I confirm I will notify you of any
	Authorised representative of Investment Adviser firm
SIGNATURE	
Full name of signatory	
Position	
Date	d d m m y y y y
	authorised signatory list for your company showing all individuals authorised to place for your company. In the absence of a signatory list we will assume the only authorised this form.
K UTMOST INTERNA	ATIONAL CHARGES
▶ Before completing this sec details recommended to you.	tion, please ask your financial adviser representative for a copy of the charging structure
level, term and type of charge	ur bond is based upon the reference code provided on your application; this will dictate the es that apply and these will be confirmed to you in your policy documents. These charges will sts together with those incurred in making any initial commission payment to your financial
	or financial adviser representative an ongoing commission payment (referred to as fund based reflected in the deduction of an additional Ongoing Service Charge equivalent to the amount
adviser representative has ex The appropriate Utmost Inter	Utmost International charge package that your financial plained will apply to your Executive Investment Account. rnational charging code should be used. Failure to provide the incorrect package being applied and/or delays.
Please enter the premium allocation percentage for this policy	% Please enter fund-based commission (if applicable) %

ULQ PR 09303 | 02/24 25 | 36

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#### DECLARATION AND APPLICATION

#### 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 dac (Utmost International) 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;
- omply 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 would apply.

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

I have been made aware that a full explanation of how Utmost International collects, uses and shares my personal information can be found at <a href="https://www.utmostinternational.com/privacy-statements/">www.utmostinternational.com/privacy-statements/</a>

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

For Utmost PanEurope dac: The Data Protection Officer, Utmost PanEurope dac, Navan Business Park, Athlumney, Co Meath, C15 CCW8, Ireland.

Or email: dataprotection@utmost.ie

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@Utmostinternational.com

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

For Utmost PanEurope dac: The Ireland Data Protection Commissioner, Canal House, Station Road, Portarlington, R32 AP23 Co. Laois, Ireland.

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 either in this application or within accompanying documentation.

#### Warning

Please read the declaration carefully. Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Executive Investment Account. 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 Utmost International can assess its possible significance. If you become aware of such a fact while Utmost International is considering your application, you should notify Utmost International immediately.

You should satisfy yourself under any taxation, exchange control or insurance law to which you may be subject that you are able to effect the proposed contract. 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 - to each applicant

A copy of this completed application form is available on request.

References to the world 'I' in this declaration refer to:

- 1. Each applicant named in this application where they are individuals or individuals acting as trustees in relation to a trust; or
- 2. Each director/authorised signatory on behalf of the company where the applicant is a company, including where the applicant is a trust company.

Utmost International Isle of Man Limited Singapore Branch will be referred to as Utmost International throughout this declaration.

#### Declaration applicable to all applicants

- 1. I understand that Utmost International has designated this Policy as suitable only for Professional Investors as defined by Utmost International in the Policy terms.
- 2. I confirm that I meet the definition of a Professional Investor. I understand that Utmost International 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.
- 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 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 will not restrict the choice of assets available under the Policy. I also understand that it will be my responsibility to:
  - only choose assets which are suitable for Retail Investors; or
  - > to inform the Investment Adviser Representative that I am now a Retail Investor.

ULQ PR 09303 | 02/24 27 | 36

- 6. 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 representative to your Head Office, I agree that:
  - a. I will apply for and sign onto my Online Service Account; 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 the contract I am applying to enter with Utmost International will be subject to the laws of Singapore and the Policy Terms will be in the English language.
- 8. a. If a policy 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 a Utmost International Executive Investment Account, and request Utmost International to issue the policies in
  - i. my name, jointly with the other applicants, if any;
  - ii. in the name of the company, if applicable; or
  - iii. in the name of the trust, if applicable.
  - 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 policy number, as shown in section A of this form.
- 9. I declare that to the best of my knowledge and belief, the statements made in this application, and any related documents, are true and complete and that I have not concealed any material fact. I agree to provide Utmost International with any further information in respect of the Application on request.
- 10. Where this application is for an Executive Investment Account, I confirm that each life assured (or parent where parental consent is required) consents to this application and agrees to my acting on their behalf for the purposes of the information provided in this application.
- 11. I authorise and request Utmost International to effect the transaction detailed in section H and confirm that such payments will discharge Utmost International from all liabilities and claims arising from those regular withdrawals. I understand that this authority supersedes any authority previously given.
- 12. I confirm that I am not a resident in the United States of America or any of its territories. Where the applicant is a corporation/trust company, the corporation/trust company is not incorporated in the United States of America or its territories.
- 13. If I become resident, or where the applicant is a corporation/trust company, the corporation/trust company becomes incorporated in the United States of America or its territories, I understand that Utmost International will not accept any further premiums until after I cease to be a resident of the United States of America or its territories, or the corporation/trust company, ceases to be incorporated in the United States of America or its territories.
- 14. I confirm that I have received a copy of the Executive Investment Account product brochure, product summary, confirmation of charges, Policy Terms, Your Guide To Life Insurance and the Code of Life Insurance Practice and I have had the opportunity to read them when completing this application form.
- 15. I confirm that the premium for this Policy has not been sourced from my Central Provident Fund (CPF) account.
- 16. I am aware of the charges payable on the Executive Investment Account, 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 to my financial adviser representative. These payments could be in addition to any commission payable by the asset provider to the financial adviser representative in respect of the assets held. I understand that Utmost International may receive payments in the form of fund manager rebates from an asset provider in respect of the assets held, and which Utmost International may share with my financial adviser representative.
- 17. I confirm that in cases where the asset(s) I have selected is not redeemable for a certain period of time, Utmost International 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 an in-specie transfer of that asset into my own name.

- 18. I appoint the financial adviser representative specified on page 2 of my application form to act on my behalf in accordance with the policy terms.
- 19. I understand that the original copy of this application form and relevant documents must be delivered by post or courier to Utmost International Isle of Man Limited Singapore Branch 6 Battery Road #16-02, Singapore 049909.
- 20. I confirm that Utmost International has not provided any investment advice to me and I, or my Investment Adviser Representative, am responsible for the selection of assets to be linked to the Portfolio Fund value of my policy arising from the investment. Utmost International does not have any responsibility for the management of the underlying assets and does not recommend any asset as a suitable investment.
- 21. The premium shown in Section E (Investment details) and any other premium tendered in respect of this application is derived solely from the Source of Funds shown in Section G and has, where required, been declared to the relevant tax authority in my country of residence for taxation.

#### Additional declarations applicable to trustee applicants:

- 22. The application for a Utmost International 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.
- 23. You can access monthly statements and valuations easily from Wealth Interactive, our online service (www.utmostinternational.com).

If you are not registered for Wealth Interactive we will send you monthly valuations unless you prefer not to receive them monthly in which case we will send you a quarterly valuation.

#### Would you prefer to be sent monthly valuation statements?

'es No

- 24. I, as director of the company, confirm the investment into Executive Investment Account is within the powers available to me as directors of the company.
- 25. I confirm that the company has not been or is not in the process of being dissolved, struck off, wound-up or terminated.
- 26. I confirm that the company shares are not held in bearer form and will not be converted to bearer share form.
- 27. I confirm that the investment into an Executive Investment Account is within the investment powers available to us as trustee of the trust.
- 28. For a corporate trustee application, I confirm that the trust company has not been, or is not in the process of being, dissolved, struck off, wound up or terminated.
- 29. For a corporate trustee application, I confirm that the company shares are not held in bearer form and will not be converted to bearer share form.

# Appointment of a Lead Policyholder - applicable if there is more than one applicant or where the applicant is a company or trustee

- 1. I agree to the appointment of the Lead Policyholder, who is named in this application, for the policies comprising our Utmost International Executive Investment Account in accordance with the Policy Terms.
- 2. I understand that this appointment is revocable and can be changed at any time (as explained in the Policy Terms).
- 3. I understand that by agreeing to the appointment of the Lead Policyholder, I authorise the Lead Policyholder to provide Utmost International 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.
- 4. I understand that these instructions will be legally binding and that Utmost International can act on instructions received from the Lead Policyholder.
- 5. Where the policyholder is a company, I confirm that it has authority to delegate all decisions on behalf of the company to the Lead Policyholder.
- 6. Where the policyholder is a trust, I confirm that the provisions of the trust allow delegation of authority to one trustee to act on behalf of all trustees.

#### Information on assets

Where requested by you, we will provide documents or reports from providers of the underlying assets in which your Portfolio Fund invests. If you require this information, please tick 'Yes'. If 'Yes' is ticked we will charge S\$140/US\$105/£70/€105 for every document that we send to you.

I/We wish to receive any documents or reports from providers of the underlying assets in which my/our Portfolio Fund invests at a cost of S\$140/US\$105/£70/€105 for each document that is sent to me/us.

Yes

No

#### Singapore residency declaration

This is a requirement by Monetary Authority of Singapore (MAS). Please tick the relevant box below.

Applicant 1	Applicant 2	Life assured 1	Life assured 2
	(if any)		(if any)

- I am "<u>ordinarily resident</u>" in Singapore under the following conditions:
  - a. citizen of Singapore, as I have not resided outside Singapore continuously for five or more years and/ or I am currently residing in Singapore, or
  - b. permanent resident or work pass/permit holder, as I have not resided in Singapore for less than a total of 183 days in the last 12 months, or
  - c. hold a pass or permit issued under the Immigration Act (Cap. 33) that has a duration longer than 90 days and have resided in Singapore continuously for at least 90 days during the last 12 months.
- 2. I am <u>not "ordinarily resident"</u> as per criteria in Q1 **but** hold Singapore citizenship or relevant pass issued by the Immigration of Checkpoints Authority of Singapore (ICA).
  - a. I will provide evidence to support non-residency as per above conditions such as employment letter.
  - I will **not** provide evidence to support non-residency as per above conditions. I therefore consent to be considered "ordinarily resident" in Singapore.
- 3. I am <u>not "ordinarily resident"</u> as per criteria in Q1 and do <u>not</u> hold Singapore citizenship or relevant pass issued by the Immigration of Checkpoints Authority of Singapore (ICA).

Please note if one person is considered as an "ordinary resident" then the policy is considered to be a Singapore resident policy, even if the other policyholder(s)/life assured are not.

- 1. The premium shown in Section E (Investment Details) and any other premium tendered in respect of this application is derived solely from the Source of Funds shown in Section G and has, where required, been declared to the relevant tax authority in my country of residence for taxation.
- 2. The application for a Utmost International 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.

#### Accredited investor declaration

#### Please tick where applicable.

I/We confirm that I am/we are an Accredited Investor as defined in the Securities and Futures Act (Cap 289) and amending regulations as being:

- → either an Individual; (✓)
- → whose net personal assets are at least S\$2 million or equivalent in a foreign currency and the net equity of my primary residence contributes no more than S\$1 million towards my/our S\$2 million net personal assets; (✓) or
- → whose annual income in the last 12 months is at least \$\$300,000 or equivalent in a foreign currency; (✔) or
- → whose financial assets (net of any related liabilities) are at least S\$1 million (✔)

I/We confirm that my/our financial adviser representative has explained and I/we understand the implications of being treated as an Accredited Investor and I/we consent to being treated as such. ( )

I confirm that I am/we are an Accredited Investor as defined in the Securities and Futures Act (Cap.289) and amending regulations as being a **Corporation** with net assets at least \$\$10,000,000 in value (or equivalent in a foreign currency) as determined by the most recent audited balance sheet of the corporation or where the corporation is not required to prepare audited accounts regularly, a balance sheet of the corporation certified by the corporation as giving a true and fair view of the state of affairs of the corporation as of the date of the balance sheet, which is a date within the preceding 12 months). (🗸)

I confirm that I am/we are an Accredited Investor as defined in the Securities and Futures Act (Cap.289) and amending regulations as being a **Trustee** of such trust as MAS may prescribe, when acting in the capacity of Trustee. (1)

Please enter the count application form was o				
Did you or an authoris	ed signatory complete this application form? ( $\checkmark$ )		Yes	No
If No, did a third party,	such as your financial adviser representative, compl	ete it on your behalf? (✓)	Yes	No
	tion you confirm that you have read through the aboven your behalf, that all the information provided in it is		arty has com <sub>l</sub>	pleted
	Applicant 1/Authorised signatory 1/ Trustee 1	Applicant 2/Authorised	l signatory 2	·/
SIGNATURE				
Date	d d m m y y y y	d d m m y y	у у	
	Applicant 3/Authorised signatory 3/ Trustee 3	Applicant 4/Authorised Trustee 4	l signatory 4	./
SIGNATURE				
Date	d d m m y y y y	d d m m y y	уу	
Copies of the Policy Te	rms and/or this completed application are available o	on request. A copy of the polic	cy terms for y	our

application are contained on the Utmost International website. www.utmostinternational.com



#### VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER REPRESENTATIVE/ SUITABLE CERTIFIER TO COMPLETE - THIS SECTION APPLIES TO ALL APPLICANT TYPES

Please note that we will not be able to issue the policy until you have provided the necessary identification documentation and completed this section.

We require one document from part A and one from part B. If neither document in part A is available, please provide the reason why and provide two formal documents showing appropriate personal details and verifiable reference numbers from part B.

When certifying a document, the certifier should state "I hereby confirm that this document is a true copy of the original which I have sighted".

If the document is verifying the identity of a natural person, the certifier should also state that they have met the person whose identity is being verified and use the following statement "I hereby confirm that this document is a true copy of the original which I have sighted and the photograph represents a good likeness of the client who I have met"

The suitable certifier must provide the following:

- > his/her full name and signature
- > his/her company name and position within the company
- > the date of certification

Identification documentation should be current and valid. Evidence of address should be the latest available, but no more than six months old.

▶ Please tick (✓) to indicate the identification you have supplied for each individual party to the policy. If an Investment Adviser Representative has been appointed we may need to verify the identity of the appointee.

ULQ PR 09303 | 02/24 31 | 36

Pa	rt A - Individual whose iden	tity is being verified				
1	Name					
	Capacity					
	Type of document	Passport	National identity card			
	Document reference					
2	Name					
	Capacity					
	Type of document	Passport	National identity card			
	Document reference					
Pa	rt A - Reason why documen	ts are not provided (i	f applicable)			
Pa	rt B - Proof of residence - In	dividual whose ident	ity is being verified			
Th	ese must be less than six mo	onths old		1		2
1	A recent utility, rates or cou	ncil tax bill (mobile/c	ell phone bills not acceptable)			
2	2 A recent mortgage statement, giving the residential address					
3	3 An extract from the official register of electors					
4	A state pension, benefit or	other government pr	oduced document showing benefit entitlement			
5	A recent tax assessment do	cument				
6	A recent account statement	t from bank or credit	card (store cards not acceptable)			
7	Proof of ownership or renta	l of the residential ac	ddress			

If there are more than two applicants, please photocopy **section M1**, attach the details with this application form and tick here  $(\checkmark)$ 

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

Please contact us if you are unable to supply any of the above mentioned documents.

#### Financial crime - risk rating

# ▶ Please refer to the Source of Funds and Source of Wealth guidelines (available from Utmost International) 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 wealth. In order to speed up the application process we have provided you with the table below to allow you to find out 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
Example	Singapore (1)	Singapore (1)	2

#### Utmost International 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 updated individually. If additional pages are added, each separate page must be initialled by all applicants. Please contact us if you are unable to supply any of the above-mentioned documents.

M 2

VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER REPRESENTATIVE/ SUITABLE CERTIFIER TO COMPLETE ADDITIONAL INFORMATION FOR NON CORPORATE TRUSTEE APPLICANTS

Enclosed (✓)

- 1. Verification of the identity and address of all individual trustees.
- 2. Verification of the identity and address of the protector (if any).
- 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.
- 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.

Capacity (✓)	Settlor/Donor	Protector	Beneficiary
Name			
Date of birth or death	d d m m y y y y	Birth	Death
Address			
	Postcode	Country	
Capacity (✔)	Settlor/Donor	Protector	Beneficiary
Name			
Date of birth or death	d d m m y y y y	Birth	Death

ULQ PR 09303 | 02/24 33 | 36

Address				
	Postcode		Country	
Capacity (✓)	Settlor/Donor	Protector	Beneficiary	
Name				
Date of birth or death	d d m m y y y y	Birth	า	Death
Address				
	Postcode		Country	
Class of beneficiary if not named (an extract of the deed may be provided)				

You may also wish to provide identification documentation at the time of application/assignment for the named parties to the trust (for example, beneficiaries) in order to avoid delays on subsequent transactions where documentary evidence is required. If there are more parties to the trust, please photocopy this page, attach the details with this application form and tick here (🗸)

M 3

VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER REPRESENTATIVE/ SUITABLE CERTIFIER TO COMPLETE - ADDITIONAL INFORMATION FOR CORPORATE/ CORPORATE TRUSTEE APPLICANTS

Enclosed (✓)

- 1. A list of all directors' names and unique identification numbers.
- 2. Verification of the identity of at least two directors, one of whom must be an executive director.
- 3. Certified copy of the Certificate of Incorporation or the other official registration document.
- 4. Evidence of the registered office of the company, e.g. business registration (where applicable).
- 5. Certified copy of the company search enquiry of the company registry (same as the place of incorporation of the company), or certified certificate of incumbency or equivalent as issued by the company's registered agent, within the last six months.
- 6. Certified authorised signatory list or extract from board minutes empowering a named person to open/operate an account
- 7. Verification of identity of one signatory empowered to give instructions (if not one of the directors identified above).
- 8. Trading company latest annual report and accounts. Non-trading company evidence of the Source of Funds.
- 9. Private limited company Verification of the identity of all shareholders holding 25% (or 10% for high risk circumstances) or more of the issued share capital as at the date of the application. Where the shareholders are not individuals, or where there are any individuals (other than shareholder) who exercise ultimate control over the management of the company, we will require verification of the identity of the ultimate beneficial owner of those entities / individuals and their relationship to the company.
- 10. For corporate trustee application 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.

#### Ν

#### FINANCIAL ADVISER REPRESENTATIVE/SUITABLE CERTIFIER

#### Declaration by the financial adviser/suitable certifier

#### PART 1 WHO HAS MET THE CLIENT

Please complete one of the following:

I have met my client(s) in person

I have met my client(s) face-to-face via secure live video stream

I have not met my client(s) face-to-face

#### PART 2 HOW HAS THE CUSTOMER DUE DILIGENCE (CDD) BEEN OBTAINED

Please confirm which items of CDD have been provided and how they were obtained by ticking the relevant boxes:

Please note 'Obtained via a third party who has met the client face to face' also includes via live video stream.

	OBTAINED BY THE ADVISER DIRECTLY FROM THE CLIENT	OBTAINED VIA A THIRD PARTY WHO HAS MET THE CLIENT FACE TO FACE	PROVIDED DIRECT TO UTMOST INT. BY THE CLIENT	
Valid identity document(s)				
Valid proof of residential address				
Source of funds				
Source of wealth documents/information				

#### Where certification is required, please ensure the following is carried out on each copy document:

I certify this document as a copy of the document that I have seen through <insert method of communication used> held on <x date> between me and the applicant /policyholder. The document has not been tampered with and I have received the same confirmation from the applicant /policyholder

#### PART 3 THIRD PARTY DETAILS

If you have confirmed in either Part 1 that you have not met your client face to face or in Part 2 that CDD has been obtained via a third party who has met the client face to face, please provide the following details:

	THIRD PARTY DETAILS 1	THIRD PARTY DETAILS 2
Name of individual(s) that obtained the CDD or met the client face to face		
Date of Birth		
Residential Address		
Registered Company Name		
Registered Company Address		

Where there is more than two third parties involved in obtaining CDD, please contact your Utmost International Sales Consultant for further guidance.

ULQ PR 09303 | 02/24 35 | 36

#### PART 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 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
Regulatory body authorisation number (if applicable)	
Regulator name	
Regulator name	
Utmost International financial adviser account number	
Full name of financial adviser	
Signature of financial adviser	
Date	d d m m y y y y
Financial adviser stamp	

Utmost International Isle of Man Limited Singapore Branch 'Utmost International' is a member of the Policy Owners' Protection Scheme (PPF Scheme) in Singapore. However, this Policy issued by Utmost International (where no additional life cover purchased) is not covered under the PPF Scheme. Details of the PPF Scheme can be obtained at Singapore Deposit Insurance corporation Limited's website on <a href="https://www.sdic.org.sg">www.sdic.org.sg</a>.

# 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.

Utmost International Isle of Man Limited Singapore Branch, 6 Battery Road #16-02, Singapore 049909. Tel: +65 6216 7990 Fax: +65 6216 7999.

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.

Licensed by the Isle of Man Financial Services Authority.

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