

FRENCH EXECUTIVE PORTFOLIO



APPLICATION FORM AND TOP-UP

For individual and joint applicants

THIS DOCUMENT WAS LAST UPDATED IN SEPTEMBER 2023.

Please confirm with your financial adviser that this is the most up-to-date document for your 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 Details of the applicant(s) and life (lives) assured	4	<input type="checkbox"/>
B Premium on the life insurance contract	6	<input type="checkbox"/>
C Investment Strategy	7	<input type="checkbox"/>
D Source of Funds	9	<input type="checkbox"/>
E Nomination of beneficiaries	15	<input type="checkbox"/>
F Declaration and application	16	<input type="checkbox"/>
G Verification of customer identity for individual investors – financial adviser/suitable certifier to complete	20	<input type="checkbox"/>
H Declaration and application	22	<input type="checkbox"/>

CUSTOMER ID NUMBER(S)

If known please enter the Customer ID number(s)

Applicant 1

--	--	--	--	--	--	--	--	--	--

Applicant 2

--	--	--	--	--	--	--	--	--	--

FINANCIAL ADVISER DETAILS

Utmost PanEurope account
reference

--	--	--	--	--	--	--	--	--	--

Adviser ID

--	--	--	--	--	--

Name of financial adviser

--

Company name

--

Address

--

Telephone number

--

Fax number

--

E-mail address

--

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

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

Please sign and return your completed form to our administration centre at King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU.

All references to **Utmost PanEurope, we, us** and **our** in this application form mean Utmost PanEurope dac, who are the providers of the **French Executive Portfolio**.

LANGUAGE CHOICE

You should not proceed with this application if you are not fluent in the English language and it is not one of the primary languages of your country of birth. If you do not speak and understand English fluently you cannot proceed with this application.

(Veuillez à ne pas continuer ce formulaire de demande si vous n'êtes pas bilingue en anglais et si l'anglais n'est pas l'une des langues officielles de votre pays d'origine. Si vous ne parlez pas ou ne comprenez pas l'anglais couramment, vous ne pouvez pas continuer cette procédure de demande).

DEALING RESTRICTION PERIOD

The period comprising the cancellation period of 30 calendar days described in the Policy Terms plus an additional five days during which your premium at the contract date will remain uninvested.

During the dealing restriction period, you can not:

- i. switch units in your policy;
- ii. send us new instructions changing the underlying assets selected in your application;
- iii. send us instructions to select underlying assets if you didn't include any selected assets in your application;
- iv. request a part surrender of your policy;
- v. request regular withdrawal payments from your policy.

YOUR RIGHT TO CANCEL

You have the right to cancel your French Executive Portfolio and obtain a refund of the initial premium paid to your French Executive Portfolio. You have 30 full calendar days from the date that you receive the email confirming that your policy has been concluded. This e-mail will be sent to the e-mail address stated in this application. Further information on how to cancel can be found in the French Executive Portfolio Policy Terms and on page 19.

TAXATION INFORMATION

Under Automatic Exchange of Information (AEOI) regulations Utmost PanEurope 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 individual investors' for applications by individuals. Completion and submission of a self-certification is mandatory and failure to provide one could result in your Product being reported under AEOI by default. If any of the information contained in the self-certification changes please advise Utmost PanEurope promptly so we can determine if a new self-certification is required.

By ticking the box, I acknowledge that:

- › I am providing Utmost PanEurope with a tax mandate in accordance with French Law.
- › Utmost PanEurope will withhold French Social Tax of 17.2% plus in the first 8 years 12.8% income tax and after 8 years income tax at a rate of 7.5% on partial surrender, regular withdrawal or full surrender.
- › I may have a French tax liability in excess of the amount withheld by Utmost PanEurope and it is my responsibility to settle this with the French tax authorities.
- › I may be able to reclaim some of the tax withheld by Utmost PanEurope and it is my responsibility to do so.
- › The tax rates described above are subject to change by the French government.
- › Utmost PanEurope will not deduct ANY taxes on death.
- › I need to comply with any French tax reporting and payment of taxes. I have discussed these with my financial adviser and understand my obligations, including the timescales and penalties for not complying.

By ticking the box, I acknowledge that:

- › I am NOT providing Utmost PanEurope with a tax mandate and understand that I will be personally liable to pay the tax and report within the timelines required under French Law.
- › I need to comply with any French tax reporting and payment of taxes. I have discussed these with my financial adviser and understand my obligations, including the timescales and penalties for not complying.
- › Utmost PanEurope will not deduct ANY taxes on death.

You need to tick one of the boxes - we cannot process your application without one of the boxes being ticked.

ONLINE SERVICE ACCOUNT ON WEALTH INTERACTIVE

All applicants must have an Online Service Account before the policy can be issued. All applicants will receive an email 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.

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.

By ticking the box, I confirm that, all applicants have activated their Online Service Account in line with our Policy Terms. If the box is not ticked, we will not be able to process the application.

COMPLETING THE FORM

To complete this form:

- › use CAPITAL LETTERS only
- › use blue or black ink or complete in editable PDF format
- › specify choices as appropriate
- › complete all relevant sections;
- › do not use correction fluid; any amendments should be crossed out and initialled by the applicant.

Correspondence address
(if left blank we will use
the residential address for
correspondence)

Postcode

Postcode

Telephone number
including area code (daytime)

--

--

Telephone number
including area code (evening)

--

--

E-mail address (please note
each client must have a unique
email address. An email address
cannot be shared by users on
Wealth Interactive.)

--

--

EMPLOYMENT DETAILS

THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.

Please give details of your employer or your own company, if self-employed.

If you have retired or are not currently employed please include details of your previous employer or your own company.
If you have never been employed, please state N/A. Please also enter your final year's salary/income and bonus if any.

	Applicant 1			Applicant 2 (if any)		
Employment status (✓)	Employed	Self Employed		Employed	Self Employed	
	Retired	Not employed		Retired	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						
Date of retirement/ unemployment (if applicable)						
Address of employer or your own company						
	Postcode			Postcode		
Country						
Website address of employer or your own company (if any)						
Last year's gross salary/ income amount						
Currency (✓)	Euro €	GBP£	US\$	Euro €	GBP£	US\$
	CHF	SEK		CHF	SEK	
Last year's bonus amount (if applicable)						

Currency (✓)

Euro €

GBP£

US\$

Euro €

GBP£

US\$

CHF

SEK

CHF

SEK

If you receive income from another source, please provide full details here. (e.g. Dividend, Investment, rental income including their nature and source)

--

--

POLITICALLY EXPOSED PERSON

A politically exposed person (PEP) is someone entrusted with a prominent public function, an immediate family member or a known close associate of such a person. Examples of these are:

- › Heads of government and state
- › Ministers
- › Senior officials in public sector enterprises
- › Members of Parliament or equivalent
- › Civil servants in the judiciary and military
- › Other key public servants

If the applicant(s), or any other party connected to this application either now or in the past, could be classed as a politically exposed person (PEP), or connected with a PEP, please provide details.

--

If a client is a PEP, or is linked to a PEP, Source of Funds evidence must be provided with the application and funding must come from the applicant's bank account. Due to the increased risk of accepting business from PEPs and the specific regulatory requirements relating to them, Utmost PanEurope will require Source of Wealth information which can be provided using the Source of Wealth Questionnaire, and may also require Source of Wealth evidence.

EXISTING CONTRACTS

Please provide details of any existing Utmost contracts you have or are making payments to (if applicable)

Type of contract		Type of contract	
Policy number		Policy number	

B PREMIUM ON THE LIFE INSURANCE CONTRACT

POLICY CURRENCY

I wish my policy to be valued in (✓)

Euro €

GBP£

US\$

CHF

SEK

Please note if no currency is entered your policy currency will be Euros. THIS IS YOUR POLICY CURRENCY. IT CANNOT BE CHANGED AFTER THE POLICY IS SET UP.

PREMIUM PAYMENT

Currency (✓)

Euro €

GBP£

US\$

CHF

SEK

Premium amount

--	--	--	--	--	--	--	--	--	--	--	--

You will need to transfer your premium to us by electronic bank transfer using the details below.

The premium payment must come from an account in the name of the applicant(s).

All premiums need to be sent to Utmost PanEurope.

NOTE

If you choose a policy currency which is different to the currency in which your premium is paid, we will not convert your premium and you could be exposed to exchange rate fluctuations. For more information please see term 3.1.1 in the Policy Terms.

BANKING DETAILS

STERLING PAYMENTS

Swift code: NWBKGB2LXXX
Sort code: 56-00-68
Bank: National Westminster Bank, Southampton
Beneficiary: Utmost PanEurope dac
IBAN: GB59NWBK56006837519611

OTHER CURRENCY PAYMENTS (SWIFT PAYMENTS)

Payments should be made to Utmost PanEurope dac's accounts held with National Westminster Bank, London.

SWIFT code:*	NWBKGB2LXXX		
Bank:	National Westminster Bank, London		
IBAN:	(select as applicable, see below)		
1. US dollar	IBAN - GB36NWBK60730140501418	3. Swedish krona	IBAN - GB48NWBK60730140501493
2. Euro	IBAN - GB26NWBK60720240501469	4. Swiss franc	IBAN - GB74NWBK60730166004071

* SWIFT is an acronym for Society for Worldwide Interbank Financial Telecommunications.

** IBAN stands for international bank account number and is always used in conjunction with a bank identifier code (BIC/SWIFT).

IMPORTANT

Please make sure that the applicant name and/or policy number is/are quoted in the payment field.

C INVESTMENT STRATEGY

In this section, you choose which investment strategy the value of your policy will be linked to.

SelfSelect - you or your fund adviser can select the underlying assets the value of your policy is linked to.

Discretionary asset management - you request us to link the value of your policy to a discretionary asset portfolio which is managed by one of the discretionary asset manager's chosen by us.

SELFSELECT

Please use this section to list any stocks, shares and external funds which, (if applicable), the units of your policy are linked to.

Please indicate your investment choice, using whole percentages only. A minimum of €600/£400/US\$600/CHF800/SEK4,800 must be invested in any asset selected.

Utmost PanEurope does not provide investment advice and has no responsibility for the performance of your selection of investments. It is for you and your adviser to choose the investments to link the value of your policy to.

Please refer to the Investment strategy options brochure or the Asset list for a list of assets available. We may add or remove assets on occasion, you can find the latest Asset list on www.utmostinternational.com

You need to complete all sections of the table below in relation to an asset choice. If we are unable to identify which asset you have chosen this will cause a delay in accepting your application. If you do not complete this table then we will invest your premium in a money market fund denominated in your premium currency in line with the Policy Terms.

FRENCH EXECUTIVE PORTFOLIO
APPLICATION FORM AND TOP-UP

ASSET IDENTIFIER/ ISIN	ASSET NAME	SHARE CLASS	BASE CURRENCY OF FUND	INVESTMENT % (WHOLE % NUMBERS ONLY)
				%
				%
				%
				%
				%
				%
				%
				%
				%
				%
				%
				%
				%
Total				100 %

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

Telephone number including
area code (daytime)

Telephone number including
area code (evening)

Fax number

E-mail address

DISCRETIONARY ASSET MANAGEMENT OPTION ONLY

Please indicate below which Discretionary Asset Portfolio you wish the value of your policy be linked to.
Please only tick one of the options.

BROOKS MACDONALD INTERNATIONAL	€	£	US\$	RATHBONE GREENBANK INVESTMENTS	€	£	US\$	RATHBONE INVESTMENT LIMITED	€	£	US\$
MPS Fixed Interest				Strategy 1				Strategy 1			
MPS Defensive				Strategy 2				Strategy 2			
MPS Cautious Balanced				Strategy 3				Strategy 3			
MPS Balanced				Strategy 4				Strategy 4			
MPS Growth				Strategy 5				Strategy 5			
MPS High Growth				Strategy 6				Strategy 6			

LGT VESTRA JERSEY LIMITED	€	£	US\$	SMITH & WILLIAMSON INVESTMENT MANAGEMENT (EUROPE) LTD	€	£	US\$	QUILTER CHEVIOT	€	£	US\$
Global Sustainable Low Risk				Strategy 1				DPS Ireland Conservative			
Global Sustainable Medium Risk				Strategy 2				DPS Ireland Income			
Global Sustainable High Risk				Strategy 3				DPS Ireland Balanced			
				Strategy 4				DPS Ireland Growth Strategy			
				Strategy 5				DPS Ireland Equities			
				Strategy 6							
				Strategy 7							

D SOURCE OF FUNDS

THIS SECTION MUST BE COMPLETED IN ALL INSTANCES, PLEASE NOTE THIS SECTION CONTINUES ON THE FOLLOWING FOUR PAGES.

BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM

The bank account must be in the name of the applicant(s).

If you are making multiple payments, please photocopy this page, attach the details and the reason why multiple payments are being made with this application form and tick here (✓)

Payment amount	<input type="text"/>	Payment currency	<input type="text"/>
Bank account holder (name as stated on bank account)	<input type="text"/>		
Bank account number/IBAN*	<input type="text"/>		
Sort code** (if applicable)	<input type="text"/> - <input type="text"/> - <input type="text"/>		
SWIFT or BIC code** (if applicable)	<input type="text"/>		
Bank name	<input type="text"/>		
Bank address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	<input type="text"/>	
How long has this account been held?	<input type="text"/>	years	<input type="text"/>
	<input type="text"/>	months	
Additional information that may be required by the bank	<input type="text"/>		

*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).

Where your funds come from more than one source, you should complete all relevant sections to give us the full picture of its origin.

- › you are resident in; **and**
- › you are funding from; **and**
- › your financial adviser is regulated in,

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 PanEurope dac version).

Total amount received	Currency		Amount				
Number of years income accumulated			years				
Institution holding the funds							
Name of account where funds have been held							
Account number							
Length of time funds have been in this account			years				months
Nature of business							
Main occupation during the accumulation period (e.g. Director. If you have retired please include your occupation before retirement. Please check that the occupation is not on our list of prohibited documents as confirmed on our Source of Wealth and Source of Funds 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				

- › 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 self-employed

b. Compensation

Name of organisation or individual that paid compensation	<input type="text"/>	
Reason for compensation	<input type="text"/>	
Country compensation was awarded	<input type="text"/>	
Total amount received	Currency <input type="text"/>	Amount <input type="text"/>
Date of received	<input type="text"/> d <input type="text"/> d <input type="text"/> m <input type="text"/> m <input type="text"/> y <input type="text"/> y <input type="text"/> y <input type="text"/> 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 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	<input type="text"/>	
Description of competition	<input type="text"/>	
Country competition was held in	<input type="text"/>	
Total amount won	Currency <input type="text"/>	Amount <input type="text"/>
Date of win	<input type="text"/> d <input type="text"/> d <input type="text"/> m <input type="text"/> m <input type="text"/> y <input type="text"/> y <input type="text"/> y <input type="text"/> 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 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**
- › Bank statement showing deposit 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	<input type="text"/>								
Date of birth	<table border="1"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		
Nationality	<input type="text"/>								
Address	<input type="text"/> <input type="text"/> <input type="text"/>								
Relationship to applicant	<input type="text"/>								
Reason for gift	<input type="text"/>								
Description of gift	<input type="text"/> <input type="text"/>								
Total amount received	Currency <input type="text"/> Amount <input type="text"/>								
Date received	<table border="1"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		

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

e. Inheritance

Deceased's full name	<input type="text"/>								
Relationship to applicant	<input type="text"/>								
Date of death	<table border="1"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		
Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)	<input type="text"/> <input type="text"/>								
Amount received	Currency <input type="text"/> Amount <input type="text"/>								
Date received	<table border="1"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y		
Solicitor/lawyer's (who dealt with the estate) name	<input type="text"/>								
Solicitor/lawyer's firm name	<input type="text"/>								
Solicitor/lawyer's firm address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>								
	Postcode <input type="text"/>								

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:

- › Grant of probate (with a copy of the will) which must include the value of the estate; **or**
- › The will relating to the inheritance; **or**
- › A signed letter from the regulated solicitor dealing with the estate on letter-headed paper confirming the information supplied in this application

f. Loan

Name of loan provider

Address of loan provider

Postcode

Total amount borrowed

--	--

Date of loan

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

g. Maturing policy/policy claim/replacement policy

If the source of funds is the sale of an investment rather than maturity, please complete h instead.

Name of policy provider

Address of policy provider

Postcode

Policyholder's full name

Length of time policy held

--	--

 years

--	--

 months

► If the investment/policy being sold has been owned for less than 5 years, we need to understand the Source of Funds immediately prior to the purchase of the investment/policy. Please complete an additional relevant section to confirm this.

Reason for policy claim or replacement policy (if applicable)

Total amount received

11

11/11/2019

Surrender penalty
(if applicable)

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 copy
of **one** of the following:

- › A signed letter from the lender on letter-headed paper confirming the name of borrower, amount of loan and date of draw-down; **or**,
- › A loan statement confirming the details provided in this form

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 from previous product provider regarding notification of proceeds of claim under the policy; **or**
- › Closing statement from previous product provider

h. Sale of asset portfolio or investment

If the source of funds is a maturing investment rather than one that you are choosing to sell, please complete g instead.

Description of asset portfolio or investment (i.e. government bonds, equities etc.)	<input type="text"/>		
Name of the company that held it	<input type="text"/>		
Registered address of company	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Account name	<input type="text"/>		
Length of time asset portfolio or investment held	<input type="text"/>	<input type="text"/>	years <input type="text"/>
	<input type="text"/>	<input type="text"/>	months <input type="text"/>
<p>► IMPORTANT: Where there is a sale or transfer of assets, the relevant section must be completed to explain how the funds were originally obtained to purchase the assets.</p>			
Date of sale	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Net amount received	Currency	<input type="text"/>	Amount <input type="text"/>

► 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:

- › Legal sale document; **or**
- › Copy of contract note

i. Sale of interest in company

Company name	<input type="text"/>		
Business sector	<input type="text"/>		
Address of company	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Your connection with the company For example: owner, partner or shareholder	<input type="text"/>		
Date of sale	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sale amount	Currency	<input type="text"/>	Amount <input type="text"/>
Net amount received The amount you have received after any deductions such as fees and taxes.	Currency	<input type="text"/>	Amount <input type="text"/>

► 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 beneficial owner of this property, please select a different option for source of funds that is more appropriate

Address of property sold (including postcode if applicable)	
	Postcode

Length of time property owned years months

IMPORTANT: Where there is a sale of property, an additional relevant section needs to be completed to explain how the funds were originally obtained to purchase the property.

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); **or**
- › Copy of contract of sale detailing the details included in the application form

k. Other

Description of the activity that generated the funds

Role in relation to above activities

Period over which the activities occurred

Country in which the activity occurred

Date received years months

Proceeds received from the activity 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:

- › 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

E NOMINATION OF BENEFICIARIES

NOTES

It is possible to nominate beneficiaries on your French Executive Portfolio. You can use the nomination form below to nominate one or more beneficiaries to receive the death benefit payable on the death of the relevant life assured. As an alternative you can nominate a beneficiary using a clause bénéficiaire démembrée specific to French law. We have a draft clause bénéficiaire démembrée quasi usufruit, this is available from your financial adviser or on our website.

You should obtain your own independent legal advice to ensure either form of nomination is suitable for your needs and that you understand the implications to you and your estate.

If you nominate more than one person, any benefits of the policy will be divided equally between the beneficiaries. If you wish to specify a percentage based division of the benefits, please use whole numbers and ensure the total is 100%.

I nominate the following to receive the death benefit payable on the death of the relevant life assured.

NAME	ADDRESS	RELATIONSHIP	DATE OF BIRTH	%
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
			d d m m y y y y	
				Total 100 %

SIGNATURE

Applicant 1

Date

Applicant 2

NOTES

- Should you wish to avoid delays at claim stage we recommend you supply evidence of identity of named beneficiaries. Please provide certified evidence of the identity and address (Identification documentation should be current and valid. Evidence of address should be the latest available, but no more than six months old) and complete the 'know your client' form (available from your financial adviser) for each beneficiary.
- 'Spouse' means the spouse to whom you are married or in a civil partnership with (and not separated from) at the time the death benefit is payable.

F 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;
- › comply 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 www.utmostinternational.com/privacy-statements/

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, Portllington, 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.

IMPORTANT INFORMATION

Please read the declaration carefully.

You or your intermediary must inform us immediately if you become aware of any errors in the information provided, for example, your residency status as this may lead in accordance with the provisions L.113-8, L.113-9 and L.132-18 of the French Insurance Code to a situation where either we need to terminate your policy or your policy may be deemed null and void. Where the policy is terminated or deemed null and void, we will pay the surrender value.

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

DECLARATION - BY EACH APPLICANT

References to the word 'I' in this declaration refer to each applicant named in this application.

Declaration applicable to all applicants

1. I confirm that I have created and registered for an Online Service Account and understand that this is a condition of the application. I acknowledge that all communication relating to the policy will be provided by post or through the Online Service Account. I may object to the use of electronic means from the conclusion of the contract or at any moment.
2. I request that the premium is invested as I have instructed as an initial premium or additional premium (where applicable) for an Utmost PanEurope French Executive Portfolio and I request Utmost PanEurope to issue the policy in my name, jointly with the other applicants, if applicable;
3. I declare to the best of my knowledge and belief that the statements made in this application, and any related documents, are true and complete.
4. I confirm that Utmost PanEurope has not provided any investment advice. I or my fund adviser or, where I have chosen the discretionary asset management investment strategy, the discretionary asset manager are responsible for the selection of the underlying assets to which the value of the units in my policy are linked. I acknowledge that Utmost PanEurope is not responsible for any loss suffered or reduction in the value of my policy arising from this. Utmost PanEurope does not recommend any underlying assets as a suitable investment selection on my policy.
5. The value of the allocated units will rise and fall in line with changes in the value of the underlying assets and could become valueless. You accept this investment risk when you submit your application for the French Executive Portfolio.
6. I confirm that I am not resident in the United States of America or any of its territories. If I become resident in the United States of America or any of its territories, Utmost PanEurope may not be able to accept any further premiums until after I cease to be a resident in the United States of America or any of its territories.
7. I confirm that I have received a copy of the following items and have had the opportunity to read them before reviewing and signing this application:
 - › Policy Terms (FEP1) which includes the Important Policy Information,
 - › Charges Sheet which details the charges applicable to your policy and you have signed and retained a copy,
 - › Tax note,
 - › Product Brochure,
 - › Investment strategy options brochure,
 - › Asset list,
 - › Key Information Document (KID) for the policy and the relevant asset Key Information Documents (KIDs).
8. Where I choose to change the assets that the value of my policy is linked to, I understand that where applicable I can obtain the KID from the fund provider or through Wealth Interactive.
9. I am aware of the charges payable on the policy, including the charges payable in respect of the investments which the value of my policy is linked. I understand the charges exist partly to meet advice, promotion and distribution expenses. These may include initial and on-going payments (such as commission) made to my financial adviser. These payments could be in addition to any commission payable by the investment provider to the financial adviser in respect of the investments held. I understand that Utmost PanEurope may receive payments in the form of fund manager rebates, from an investment provider in respect of the investments held, and which Utmost PanEurope may share with my financial adviser.
10. The premium detailed in this application and any other premium tendered in respect of this application are derived solely from the source of funding provided and have, where required, been declared to the relevant tax authority in my country of residence for taxation.
11. The application for an Utmost PanEurope 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.

LANGUAGE CHOICE

I hereby confirm by ticking the box that I am fluent in the English Language. I request that the policy and all contractual and non-contractual documentation/correspondence is issued in the English Language.

FRENCH EXECUTIVE PORTFOLIO PRODUCT CHARGES

I hereby confirm by ticking the box, my financial adviser has provided me with a Charges Sheet which details the French Executive Portfolio fund charges that will apply to my policy. Please provide a signed copy of this Charges Sheet with this application form. You should retain an original copy for your records. On acceptance of your application a copy of this Charges Sheet will be available on your Online Service Account.

INVESTMENT MANDATE

Investment Mandate provides details of the aims, objectives and risk tolerance as well as the anticipated time horizon to help the discretionary asset management provide and implement a suitable long-term investment strategy.

1. I confirm that all the information in the investment mandate instruction form (Investment Mandate) is accurate, complete, can be relied upon, and that my investment objectives are as set out in the Investment Mandate. Your financial adviser will supply you with the investment mandate relevant to your chosen portfolio.
2. I understand that I must inform Utmost if the Investment Mandate changes. I understand that Utmost can accept no responsibility for the effects of any delay or failure to inform them of any such change.
3. I understand that the discretionary asset manager may use expressions in their Investment Mandate which suggest that they are providing investment management services to me because it is easier to understand. I understand that I hold units in a life assurance contract and it is these units that are linked to the value of the underlying assets that the discretionary asset manager is managing. I have no legal or beneficial rights to the assets regardless of any wording in the Investment Mandate.

CAN YOU CHANGE YOUR MIND AND CANCEL THE CONTRACT?

You may cancel the policy within 30 full calendar days from the date on which you receive the email to the email address stated in this application confirming your policy has been concluded. The cancellation request shall be made by registered letter with acknowledgement of receipt to Utmost PanEurope dac, Kind Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU or email IOMask@utmostinternational.com. You can use the following templates to draft your letter of cancellations.

Draft template letter to be used for a single policyholder (signed and dated by the policyholder):

"I, undersigned (surname, first name and address of the policyholder) declare that I renounce to the conclusion of my French Executive Portfolio Policy number (_____), that I signed on (_____) and request that you refund me of the total of the sums paid within 30 calendar days from the receipt of this letter".

Draft template letter to be used for two or more policyholders (signed and dated by all policyholder):

"We undersigned (surname, first name and address of each of the policyholder) declare that we renounce to the conclusion of our French Executive Portfolio Policy number (_____), that we signed on (_____) and request that you refund us of the total of the sums paid within 30 calendar days from the receipt of this letter".

This application should be completed by the applicant(s) unless you have asked your financial adviser to complete it.

Did you, the applicant(s), complete this application form (✓) Yes No

If No, did a third party, such as your financial adviser, complete it on your behalf? (✓) Yes No

By signing this declaration you confirm that you have read through the above declaration and, if a third party has completed the application form on your behalf, that all the information provided in it is correct.

SIGNATURE

Applicant 1

Date

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

Printed name

Applicant 2

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

A copy of this completed application form is available on request. A copy of the policy terms for your application are available here: www.utminternational.com

G VERIFICATION OF CUSTOMER IDENTITY FOR INDIVIDUAL INVESTORS - FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE

THIS SECTION MUST BE COMPLETED IN ALL INSTANCES FOR INDIVIDUAL INVESTORS.

Please note that we will not be able to set the bond live until this section has been completed and you have provided the necessary identification documentation.

Outlined below are the standard minimum requirements. In some circumstances we may need additional information.

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 copies of original documents, the suitable certifier must provide the following:

- › a statement to reflect that it is a true copy of the original
- › their name
- › their signature
- › the date of certification
- › the capacity in which they are certifying the document.

Identification documentation must 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. If a fund adviser has been appointed we may need to verify the identity of the appointee.

PART A - INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED

1. Name	<input type="text"/>		
Capacity	<input type="text"/>		
Type of document (✓)	Passport	National identity card	Photographic driving licence
Document reference	<input type="text"/>		
2. Name	<input type="text"/>		
Capacity	<input type="text"/>		
Type of document (✓)	Passport	National identity card	Photographic driving licence
Document reference	<input type="text"/>		

PART B - INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED

These must be less than six months old

1 2

1. A recent utility, rates or council tax bill (mobile/cell phone bills not acceptable)
2. A recent mortgage statement, giving the residential address
3. An extract from the official register of electors
4. A state pension, benefit or other government produced document showing benefit entitlement
5. A recent tax assessment document
6. A recent account statement from bank or credit card (store cards not acceptable)
7. Proof of ownership or rental of the residential address

PART C - FINANCIAL CRIME - RISK RATING

Please refer to the **Origin of Wealth guidelines** (available from Utmost PanEurope) for information on how to complete the table below.

To prevent financial crime, Irish 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

Please refer to the **'Origin of Wealth Guidelines'** for information on how to complete the table below.

APPLICANT	CLIENT COUNTRY OF RESIDENCE (A)	COUNTRY OF PREMIUM FUNDING (B)	TOTAL RISK RATING

Utmost PanEurope 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 reviewed individually.

If you are unsure about a particular application, please contact your Utmost PanEurope business consultant in the first instance, or alternatively contact Utmost PanEurope's International Sales Support team directly on 00353 1 479 3900

H DECLARATION AND APPLICATION

THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.

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
<input type="checkbox"/> Valid identity document(s)			
<input type="checkbox"/> Valid proof of residential address			
<input type="checkbox"/> Source of funds			
<input type="checkbox"/> 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 Sales Consultant for further guidance.

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

Utmost financial adviser account number

--	--	--	--	--	--	--	--	--	--

Financial adviser

SIGNATURE

Full name of financial adviser

Date

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

Financial adviser stamp

A WEALTH *of* DIFFERENCE

www.utmostinternational.com

Utmost PanEurope dac (registered number 311420) is regulated by the Central Bank of Ireland. Registered Office address: Navan Business Park, Athlumney, Navan, Co. Meath, C15 CCW8, Ireland.

Utmost PanEurope dac is a Category A Insurance Permit holder with the Jersey Financial Services Commission.

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

UPEQ PR 20562 | 09/23