

FULL ENCASHMENT REQUEST FORM

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

IMPORTANT NOTES

- › The encashment value will be based on the date of receipt of all requirements
- › The encashment value will be payable to the individual who according to Utmost PanEurope dac's records is entitled to receive it. This will normally be the policyholder, trustees or subsequent assignee.

HOW TO COMPLETE THIS FORM

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

HOW WE USE YOUR INFORMATION

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

WHAT TO DO WHEN YOU HAVE COMPLETED THIS FORM

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

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

USING THE EDITABLE FIELDS?

To ensure your information is saved correctly, we recommend you save the form to your desktop before you start completing the required fields.

A POLICY DETAILS

Date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Policy number(s)	<input type="text"/> <input type="text"/>
Policyholder name(s)	<input type="text"/> <input type="text"/>
Name and Address of Bank	<input type="text"/> <input type="text"/> <input type="text"/>
Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text" value="-"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name of Account	<input type="text"/>
IBAN	<input type="text"/>
BIC	<input type="text"/>

B ENCASHMENT DOCUMENTATION

Full encashment documents enclosed (tick as appropriate):

- Original policy document or Lost Policy Declaration attached
- Original letter of release if assigned
- Original deed of assignment if absolutely assigned
- Original deed of reassignment if reassigned
- Original trust form if under trust
- Power of attorney form if applicable

C ENCASHMENT DECLARATION

Signatures of all parties with an interest in the policy:

SIGNATURE

SIGNATURE

Date

d	d	m	m	y	y	y	y
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SIGNATURE

SIGNATURE

Date

d	d	m	m	y	y	y	y
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SIGNATURE

SIGNATURE

Date

d	d	m	m	y	y	y	y
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A WEALTH *of* DIFFERENCE