

BENEFIT CRYSTALLISATION EVENTS DECLARATION REQUIRED BY SECTION 787R(4), TCA, 1997

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

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.

Policyholder Name
(Print Name)

Policy Number

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This Declaration should be completed and given to the Administrator of your pension arrangement prior to the payment of any benefits from that arrangement.

If you have a Personal Fund Threshold Certificate, issued by Revenue, please enclose a copy with your completed Declaration. Where your PFT includes a defined benefit arrangement, please state the valuation factor used.

Information in relation to payment of the State pension from the Department of Social & Family Affairs is not required.

This Declaration should be completed in respect of benefits arising on or after 7 December 2005, but not including benefits of this claim.

(tick one box)

1. Did you become entitled, on or after 7 December 2005, to any pension, lump sum or any other pension related benefit? Yes No
2. Prior to, or on, the date of receiving benefits from this pension arrangement, do you expect to become entitled to any pension, lump sum or any other pension related benefit from another pension arrangement? Yes No
3. Have you directed, on or after 7 December 2005, or do you intend to direct prior to the date of receiving benefits from this pension arrangement, that a payment or transfer be made to an overseas pension arrangement? Yes No

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4. If you have answered **YES** to any of the above questions, please provide the following details to the Administrator of your pension arrangement

(i) Name of the scheme or arrangement	<input type="text"/>
(ii) Contact details for the Administrator	<input type="text"/> <input type="text"/> <input type="text"/>
(iii) Policy or reference number	<input type="text"/>
(iv) Type of pension arrangement	<input type="text"/>
(v) Date of entitlement to benefits	<input type="text"/>
(vi) Benefits provided or Value if benefits are still to be taken	<input type="text"/>
(vii) Amount of any transfer or payment to an overseas arrangement & contact details for the receiving pension arrangement	€ <input type="text"/> <input type="text"/> <input type="text"/>
(viii) Total amount of any tax free cash already taken	€ <input type="text"/>
(ix) If a defined contribution arrangement, the value of the fund on the date of benefit entitlement	€ <input type="text"/>
(x) If a defined benefit arrangement the amount of annual pension, the amount of any lump sum and the factor used for calculating the capital value of the pension	€ <input type="text"/> <input type="text"/> <input type="text"/>
(xi) The amount or market value of any assets transferred by exercise of an "ARF option".	<input type="text"/>

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I declare that to the best of my knowledge and belief, the information in this Declaration is correct

Name
(Print Name)

PPS Number

SIGNATURE

Date

A WEALTH *of* DIFFERENCE