


GIBRALTAR RESIDENT DECLARATION

1 Full name(s)	<input type="text"/> <input type="text"/>
2 Residential address	<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"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3 Contract number (if known)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4 Full name and address of the financial adviser	<input type="text"/> <input type="text"/> <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"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

(the "Financial Adviser") 

In this declaration the singular shall include the plural.

I confirm that:

- (a) this application for insurance was not the result of any direct approach by Utmost Limited;
- (b) any advice I received in respect of this application was given to me by my Financial Adviser which is either:
 - 1 licensed by the Gibraltar Financial Services Commission, or
 - 2 is authorised by the UK Financial Conduct Authority and holds the relevant passporting rights into Gibraltar, and
- (c) the insurance contract will be concluded only when Utmost Limited have accepted this application at their Head Office in the Isle of Man; they have received cleared funds in their bank account, and have issued the policy documents from their Head Office.

I understand that any premiums must be paid directly to Utmost Limited and must not be collected on their behalf by my Financial Adviser.

Once complete, return this form to Utmost Limited at: **Utmost Limited, Royalty House, Walpole Avenue, Douglas, Isle of Man, IM1 2SL, British Isles.**

How Utmost Limited use your information

We use the information you give us, about yourself and other people, to provide our products and services. In order to support our products and services, we transfer information between different entities within our immediate operating group and to appointed data processors, but we do not transfer information to other parties, unless required to do so by law or regulation. We do not carry out marketing using the information or transfer, or sell, your personal information to others for marketing purposes.

More details about how we use your information, your rights over this information and how you can exercise your rights can be found in the applicable Privacy Notice. We publish our Privacy Notices on our website at www.utmostwealth.com or you can ring us on +44 (0)1624 643 345 and request a copy.

A WEALTH *of* DIFFERENCE

Utmost Wealth Solutions and Utmost Trustee Solutions are brand names used by a number of Utmost companies. This item has been issued by Utmost Limited.

The following companies are registered in the Isle of Man. Utmost Limited (No 056473C), Utmost Administration Limited (No 109218C) and Utmost Trustee Solutions Limited (No 106739C) are regulated or licensed by the Isle of Man Financial Services Authority. Not regulated: Utmost Services Limited (No 059248C). Each has its registered office at: Royalty House, Walpole Avenue, Douglas, Isle of Man, IM1 2SL, British Isles.

The following company is registered in Ireland. Utmost Ireland dac (No 303257) is authorised by the Central Bank of Ireland and regulated by the Financial Conduct Authority in the UK for Conduct of Business Rules. Registered office: Block 2, Harcourt Centre, Harcourt Street, Dublin 2, Ireland.

	Signatory 1	Signatory 2	
SIGNATURE	<input type="text"/>	<input type="text"/>	SIGNATURE
Print full name	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
Date	<input type="text"/> d d m m y y y y	<input type="text"/> d d m m y y y y	