

For UK resident individual, joint, corporate and trustee investors

THIS DOCUMENT WAS LAST UPDATED IN MARCH 2022.

Please confirm with your financial adviser 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.

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Important note: The product(s) named in this document and to which this document relates is accurate as at December 2021 and is subject to change. To ensure applicability with respect to a product and, if applicable, a related policy, before taking any action, please liaise with your adviser and/or contact us directly.

A WEALTH of difference

www.utmostinternational.com

Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Utmost International Isle of Man Limited is registered in the Isle of Man under number 24916C.

Registered Office: King Edward Bay House, King Edward Road, Onchan, Isle of Man, IM99 1NU, British Isles.

Tel: +44 (0)1624 655 555 Fax: +44 (0)1624 611 715. 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. ULQ PR 20987 | 10/22

CUSTOMER ID NUMBER(S)						
If known please enter the Customer ID num Applicant 1	Applicant 2					
FINANCIAL ADVISER DETAILS						
Utmost International account number Name of financial adviser Company name Address						
Telephone number						
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 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 International. You are responsible for their actions or omissions.

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

All references to Utmost International, **we**, **us** and **our** in this application form mean Utmost International Isle of Man Limited are the providers of the International Wealth Bond - Life and the International Wealth Bond - Redemption.

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 individual investors' for applications by individuals or the 'Taxation information and self-certification - for entity investors' for corporate and trustee investments. 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

Before completing the application form, please make sure you have received and read through the relevant product literature:

- Details of your Utmost International International Wealth Bond Life (ref IWBL) Policy Terms or Details of your Utmost International - International Wealth Bond - Redemption (ref IWBRv1) Policy Terms.
- > Key Information Document (KID) for the International Wealth Bond Life or Key Information Document (KID) for the International Wealth Bond Redemption.
- > Key features of your International Wealth Bond and personal illustration
- > Wealth Bond (International and European) product brochure
- > Explaining your Portfolio Bond fees and charges

Your financial adviser will be able to provide you with the relevant International Wealth Bond product literature.

YOUR RIGHT TO CANCEL

You have the right to cancel your International Wealth Bond or additional investment and obtain a refund of the initial or additional premium paid, less any applicable charges* and any fall in the value of the assets linked to your International Wealth Bond. 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 International Wealth Bond Policy Terms.

*Where relevant, applicable charges include non-refundable fund charges, fees we have paid to your financial adviser 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.

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.

NEW INVESTMENT

- -

If this is an application for a NEW BOND, please indicate which type of bond you are applying for: (\checkmark)

The type of bond cannot be change after it has been set up.

Life Assurance This is called the International Wealth Bond - Life

Capital Redemption This is called the International Wealth Bond - Redemption

Reason for investment (eg saving for retirement)

If this is an application for an ADDIT							
ADDITIONAL INVESTMENT							
Type of client (✔)	Individual	Joint	Corporate/Corporate trustee	Trustee			
TYPE OF APPLICATION							

existing bond number: (you can find this in your policy documentation)

Unless your details have changed, you only need to complete the full name of each policyholder and life assured (if applicable) in section B and C. You must also complete sections D, E, F and J. Your financial adviser will also need to complete K, L and M. (Please note that in Section D, you cannot amend the original charge package for additional investments)

POLICY CURRENCY					
I wish my policy to be valued in (\checkmark)	£	US\$	€	Other (state currency)	

Please note if no currency is entered, your policy currency will be pound sterling (£). The policy currency cannot be changed after the policy is set up.

B 1

In this section, please give details of all individual applicant(s). Applicants must be at least 18 years old and the maximum age is 90. The maximum age for a life assured is 90.

If there are any further applicants, please photocopy this page, attach the details with this application form and tick here (✓)

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

Applicant 1			Ар	Applicant 2 (if any)			
Title (✔)	Mr	Mrs	Miss		Mr	Mrs	Miss
	Other				Other		
Full forename(s)							
Surname							
Maiden name, previous name or alias							
Sex (✔)	Male	Ferr	nale		Male	Fen	nale
Date of birth	d d m r	m y y	у у	d	d m r	n y y	у у
Nationality							
Dual nationality (if applicable)							
Passport number/national identity card number							
Residential address (Please note we do not accept c/o and PO Box addresses)							
	Postcode			P	ostcode		
Tax reference number							
Correspondence address (if left blank we will use the residential address for correspondence)							
	Postcode			P	ostcode		

Utmost International accepts no responsibility for the consequences of sending documentation to this correspondence address, or to an address notified subsequently. Utmost International reserves the right to send correspondence to your residential address where regulations prevent it being sent to any other address.

We can only accept one correspondence address for the bond and will default to Applicant/Trustee 1 residential address if this is left blank.

Telephone number including area code (daytime)					
Telephone number including area code (evening)					
E-mail address					
Is the applicant(s) also going to be a life assured? (✔)	Yes	No	Yes	No	
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/Trustee 1		Applicant/Trustee 2 (if any)		
Employment status (🗸)	Employed	Self Employed	Employed	Self Employed
	Retired	Not employed	Retired	Not employed
Date of retirement/unemployment (if applicable)	d d m m y	у у у	d d m m y	у у у
Name of employer or your own company				
Start date with current/last employer or your own company	m m y y		m m y y	
Address of employer or your own company				
	Postcode		Postcode	
Country				
Website address of employer or your own company (if any)				
Occupation (including role eg Director and sector eg Accountancy. 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 Funds and Source of Wealth Guidelines)				

Last year's gross salary/ income amount				
Currency (🗸)	£	US\$	£	US\$
	€	Other (state currency)	€	Other (state currency)
Last year's bonus amount (if applicable)				
Currency (🗸)	£	US\$	£	US\$
	€	Other (state currency)	€	Other (state currency)
If you receive income from another source, please provide full details here. (e.g. Dividend, Investment, rental income including their nature and source)				

DETAILS OF THE TRUST (IF APPLICABLE)

In this section, please give the following details: the name of the trust (for example, 'the Mary Jones Policy Trust dated 1 April 1990', 'the John Brown Will Trust') and the date the trust was created on.

The trust name is

The trust was created on

Trust details

(Please explain the reason for the establishment of the trust, country of establishment of trust, indication of the value of the trust assets what type of trust it is and detail the source of the trust assets and the country of origin)

B2 CORPORATE/CORPORATE TRUSTEE APPLICANT

Г

In this section, please give details of the corporate applicant.

CORPORATE/CORPORATE TRUSTEE APPLICANT

Please tick (✔)	Private company	Public company	Other
Corporate name			
Contact person			
Country of registration			
Date of incorporation	d d m m y y y y		

Registered office address (This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses)

Correspondence address

Postcode			
Postcode	 	 	

Utmost International accepts no responsibility for the consequences of sending documentation to this correspondence address, or to an address notified subsequently. Utmost International reserves the right to send correspondence to your residential address where regulations prevent it being sent to any other address.

We will default to the registered office address if the correspondence address field is left blank.

Telephone number including area code (daytime)	
E-mail address	
Corporate website address	
Please state the company's main business (for example manufacturing or trading company)	
AUTHORISED SIGNATOR	RIES

Please confirm the minimum number of authorised signatories of the company needed to give instructions

The company directors/authorised signatories of the company must complete and sign the declaration in Section J.

- Additional documents are needed to evidence the identity of at least two directors, one of whom must be an executive director of the company. Plus, if different to this, we also need to verify the identity of those who have signed the application form.
- If there is only a sole director we will require evidence of identity for this individual and at least one other authorised signatory.

B3 POLITICALLY EXPOSED PERSON

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

Examples of these are:

> Heads of government and state

- > Senior officials in public sector enterprises
- > Civil servants in the judiciary and military
- > Government ministers or deputy or assistant government ministers
- > Members of Parliament or equivalent
- 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 International will require Source of Wealth information which can be provided using the Source of Wealth Questionnaire, and may also require Source of Wealth evidence.

Β4

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

Type of contract	Type of contract
Policy number	Policy number

NOTE

Do not complete this section if you have selected capital redemption in Section A as there are no lives assured on a capital redemption bond and we will not record the details if you fill in this section in error.

Please note you do not need to complete this section if the applicant(s) is going to be the only life/lives assured. If this is the case, please just tick where indicated in section B1.

The maximum age for a life assured is 90.

If there are any further lives assured, please photocopy this page, attach the details with this application form and tick here (✓)

If additional pages are added, each separate page must be initialled by all applicants. If there are two or more lives
assured, the policy will end on the death of the last of the lives assured.

	First addition	al life assu	red [if any]	Seco	ond addit	ional life a	ssured [if any]
Title (✔)	Mr	Mrs	Miss		Mr	Mrs	Miss
	Other				Other		
Full forename(s)							
Surname							
Maiden name, previous name or alias							
Sex (✔)	Male	Ferr	ale		Male	Fen	nale
Date of birth	d d m m	n y y	уу	d	d m n	n y y	у у
Nationality							
Tax reference number or equivalent							
Residential address (Please note we do not accept c/o and PO Box addresses)							
	Postcode			Po	stcode		
Country of residence							
Relationship of life assured to applicant							

D UTMOST INTERNATIONAL CHARGES AND ADVISER FEES

UTMOST INTERNATIONAL CHARGES

Please enter the code for the Utmost International Charge package that your financial adviser has explained will apply to your International Wealth Bond.

Do not use the illustration reference; only the appropriate Utmost International charging code should be used. Failure to provide the right code could result in the incorrect package being applied and/or delays.

These charges will be taken into account within your personal illustration, which forms part of the bond's key features documentation. Please read through these carefully before completing this application form.

ADVISER FEES

Please enter the details of the fees to be facilitated by Utmost International, which you have agreed with your financial adviser, or tick the 'No fee payable' box where Utmost International is not to pay a fee to your financial adviser from your International Wealth Bond.

Initial fee

Monetary amount or	%	of initial pre	emium	No fee payable from your International Wealth Bond
I wish the initial fee to be paid in the following currency (✔)	£	US\$	€	Other (state currency)
Please note: to pay a fee in a chosen curre amount of the fee.	ncy, we m	ust receive a	premium pay	ment in that currency that at least matches the
Do you want us to pay this fee (\checkmark)	fee from		m premium p	onal Wealth Bond meaning we will deduct the payment before the remainder is invested in
	fee by ma	aking a one-o	off withdrawal	al Wealth Bond meaning we will deduct this (part surrender) of this amount from your n has been invested?
Ongoing service fee				
Monetary amount each ye	aror	% c	f value of the	International Wealth Bond each year.

No ongoing service fee payable from your International Wealth Bond

Service fees will be paid in the policy currency - see Section A. Ongoing service fees are paid quarterly by a regular withdrawal from your policy. All amounts should be inclusive of any VAT.

Please note that fees are paid from your International Wealth Bond by Part Surrenders and will count towards the 5% tax deferred allowance. We suggest that you discuss the above with your financial adviser before selecting your option.

The first payment date would be the last working day of the second month following the first calendar quarter occurring after your policy starts. So if your policy starts on 1 November, the first calendar quarter end is 31 December and the first payment would be made on the last working day of February.

INVESTMENT DETAILS

PREMIUM PAYMENT				
Currency (🗸)	£	US\$	€	Other (state currency)
Amount to be invested in base currency				

> The premium payment must come from an electronic bank transfer held in the name of the applicant(s).

► The minimum initial investment amount is £100,000 (US\$150,000, €150,000) and other currency amounts as listed in the International Wealth Bond Key Features Document). The charge package and policy currency you have chosen for your International Wealth Bond cannot be changed once the policy has started.

STERLING PA	YMENTS				
From UK banks (CHAPS* payments)		From non-UK banks	From non-UK banks (SWIFT** payments)		
Sort code:	55-91-00	SWIFT code:	RBOSIMD2XXX		
Bank:	Isle of Man Bank, East Region, 2 Athol Street, Douglas, Isle of Man	Sort code: Bank:	55-91-00 Isle of Man Bank, East Region,		
Beneficiary:	Utmost International Isle of Man Limited		2 Athol Street, Douglas, Isle of Man		
IBAN***:	GB94NWBK55910010939946	Beneficiary:	Utmost International Isle of Man Limited		
		IBAN	GB94NWBK55910010939946		

OTHER CURRENCY PAYMENTS (SWIFT PAYMENTS)

Payments should be made to Utmost International Isle of Man Limited'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 - GB05NWBK60730167544800	7. New Zealand dollar	IBAN - GB26NWBK60730167576141			
2. Euro	IBAN - GB63NWBK60720267545858	8. Norwegian krone	IBAN - GB23NWBK60730167568823			
3. Australian dolla	r IBAN - GB18NWBK60730167535836	9. Singapore dollar	IBAN - GB53NWBK60730167598838			
4. Canadian dolla	r IBAN - GB80NWBK60730167521916	10. Swedish krona	IBAN - GB69NWBK60730167554997			
5. Danish krone	IBAN - GB22NWBK60730167545270	11. Swiss franc	IBAN - GB14NWBK60730167541534			
6. Japanese yen	IBAN - GB40NWBK60730167538835					
		1				

* CHAPS is an electronic bank-to-bank same day value payment made in the UK in pound sterling (£).

** 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).

SOURCE OF FUNDS

This section must be completed in all instances.

BANK DETAILS OF WHERE FUNDS ARE BEING REMITTED FROM

- Once the premium has been sent to us, we will require a copy of the premium payment confirmation. This can be e-mailed to us.
- ▶ 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	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
Additional information that may be required by the bank	

> 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).

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).

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

Total amount receivedCurrentNumber of years income
accumulatedImage: CurrentInstitution holding the fundsImage: CurrentName of account where funds
have been heldImage: Current

Account number

Length of time funds have been in this account 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

Average annual salary over the accumulation period Average annual bonus over the accumulation period

b. Compensation

Name of organisation or individual that paid compensation Reason for compensation

Country compensation was awarded

Total amount received

Date of received

Currency Amount
years
years months

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

Postcode		
Currency	Amount	
Currency	Amount	

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:

- 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

Date of win

Cur	renc	су [Am	oun	nt
	Cur	Currenc	Currency	Currency	Currency	Currency Am	Currency Amour

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 letterheaded 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

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

d. Gift

Full name of person who gave the gift Date of birth	d d m m y y y y
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

e. Inheritance

Deceased's full name

Relationship to applicant

Date of death

Details of the inheritance Tell us about the assets forming the inheritance (eg. cash, property, shares etc.)

Amount received

Date received

Solicitor/lawyer's (who dealt with the estate) name Solicitor/lawyer's firm name

Solicitor/lawyer's firm address

d	d	m	m	у	у	у)	/			
Curr	enc	y			An	nou	nt				
	d	m	m	у	у	у)	/			
d	G										
a	G	I									
a	u									 	
a									 	 	
a			I						 	 	
a					·				 	 	

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 letterheaded paper confirming the information supplied in this application

f. Loan

Name of loan provider

Address of loan provider

Total amount borrowed

Date of loan

iou

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

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	Currency Amount
Surrender penalty (if applicable) Date received	d d m m y y y y

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.) Name of the company that held it Registered address of company					
Account name					
Length of time asset portfolio or investment held	years months				
or investment held years months If the portfolio/investment 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 portfolio/investment. Please complete an additional relevant section to confirm this. Date of 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:

- 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

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

Net amount received

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

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
If the property being sold has be	en owned for less than 5 years, we need to

If the property 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 property. Please complete an additional relevant section to confirm this.

Date of sale	d d m	n m	у	у	у	у	
Total sale amount	Currency			Am	oun	t	
Net amount applicant received from sale	Currency			Am	oun	t	

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

Proceeds received from the activity

years	months
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 antimoney laundering regulation, for example a regulated accountant or lawyer

G REQUEST TO APPOINT A DISCRETIONARY ASSET MANAGER(S) AND AUTHORISED CUSTODIAN

You can request us to appoint up to three discretionary asset managers and authorised custodians to your policy. Please print this page for each discretionary asset manager you are requesting us to appoint.

DETAILS OF THE DISCRETIONARY ASSET MANAGER(S)

Name of discretionary asset manager	
	Postcode
Discretionary asset manager registered address	
Discretionary asset manager FCA licence number	

DISCRETIONARY ASSET MANAGER DECLARATIONS

The discretionary asset manager and Investment Mandate declarations are made by each applicant for Individual applicants, each trustee for a trustee applicant, or each authorised signatory on behalf of a corporate applicant.

- 1. I hereby request that the discretionary asset manager be appointed by Utmost International as discretionary asset manager(s) to manage the composition of the assets of the portfolio fund in respect of my Policy.
- 2. I understand that the management of the assets shall be at the discretion of the discretionary asset manager(s) and the discretionary asset manager(s) may have a preferred authorised custodian and Utmost International may agree to appoint that authorised custodian.
- 3. I understand that the discretionary asset manager charge detailed below will be paid by Utmost International. I understand that these charges will be recouped as a portfolio fund charge known as the discretionary asset manager charge and that this charge will be deducted in the policy currency and paid quarterly.
- 4. I understand that I or any person acting on my behalf can have no influence over the selection of assets chosen by the discretionary asset manager(s).

DISCRETIONARY ASSET MANAGER CHARGE

Please enter the discretionary asset manager charge that your financial adviser has explained will apply to your International Wealth Bond.

The charges for this service (inclusive of VAT or other applicable tax, if any) are as follows:

% ach year (to be taken quarterly) of the value of the assets managed by the discretionary asset manager

which are held by either the default custodian or the authorised custodian;

OR

monetary amount £ each year to be taken quarterly. The maximum percentage fee is 1.5%. This

also applies to the monetary amount option. Please review the amount of the charge regularly to ensure it remains below the maximum allowed.

Please refer to your Policy Terms for further information on the discretionary asset manager charge.

Currently there is no VAT applicable to this charge, however Utmost International reserves the right to deduct from the Policy any VAT or other tax that may become applicable to Utmost International in respect of the discretionary asset manager charge in the future.

INVESTMENT MANDATE DECLARATIONS

The Investment Mandate provides details of the aims, objectives and risk tolerance as well as the anticipated time horizon to help the discretionary asset manager provide and implement a suitable long-term investment strategy for the Assets they manage. Whilst an Investment Mandate must be completed for each discretionary asset manager, the aims, objectives and risk tolerance must be the same in each Investment Mandate.

- 1. I confirm that all the information in the Investment Mandate(s) is/are accurate, complete, can be relied upon, and that my investment objectives are as set out in the Investment Mandate(s).
- I understand that I must inform Utmost International if the Investment Mandate(s) changes. I understand that Utmost International can accept no responsibility for the effects of any delay or failure to inform them of any such change. I also understand that only three changes can be made to the Investment Mandate(s) in any 12 month period.
- 3. I confirm that I/we have also completed the discretionary asset manager's form which contains details of the Investment Mandate.
- 4. I request that Utmost International agree for the authorised custodian to send reports to me which cover the investments that they hold on behalf of Utmost International. I understand that it will not contain the full value of the International Wealth Bond as this is only provided by Utmost International.
- 5. 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 no provision in the Investment Mandate will operate so as to cause the International Wealth Bond to be regarded as a Personal Portfolio Bond or for me/us to have a legal or beneficial interest in any of the Assets of the International Wealth Bond or for me to have a contractual relationship with the discretionary asset manager.

DETAILS OF THE CUSTODIAN

A custodian will hold the assets linked to your policy.

Default custodian - a professional banker or other organisation, which is authorised by its regulator to provide custodian and depository services that we normally use to hold our Assets.

Authorised custodian - a professional banker or other organisation which is authorised, where appropriate, by its regulator to provide custodian and depository services and which we have appointed at your request.

Please complete the details for the custodian(s) you would like us to consider appointing. You can request the following:

- > up to three authorised custodians
- > our default custodian only
- > a combination of one authorised custodian and our default custodian.

If requesting an authorised custodian please also complete the 'Request for Utmost International to appoint authorised custodian(s)' form available from your financial adviser.

If the discretionary asset manager has a preferred authorised custodian which they want us to consider appointing then you **may not** need to complete this section'. (Note to financial adviser: *if you are unsure if the custodian details need to be completed please check with your usual sales consultant.*)

Please select the custodian(s) you would like us to consider appointing to hold the assets linked to your policy:

PLEASE SELECT THE CUSTODIAN(S) YOU WOULD LIKE US TO CONSIDER APPOINTING TO HOLD THE ASSETS. (TICK ONE OPTION ONLY (✔))		NAME OF CUSTODIAN(S)	PLEASE ENTER THE NAME OF THE DISCRETIONARY ASSET MANAGER YOU WOULD LIKE US TO CONSIDER APPOINTING TO MANAGE THE ASSETS. ONLY ONE DISCRETIONARY ASSET MANAGER CAN BE APPOINTED TO EACH CUSTODIAN.	MONETARY AMOUNT
	Assets held by our default custodian	Default		
	Assets held by our default custodian and one other authorised custodian	Default		
	Assets held by one authorised custodian			
	Assets held by two authorised custodians	Lead custodian *		
	Assets held by three authorised custodians.	Lead custodian *		

* Where the assets are held in part by the default custodian, the default custodian will be the lead custodian. Where you request us to appoint more than one authorised custodian you also need to request a lead custodian if we agree to that request we will instruct the lead custodian 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 held with Utmost International.

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

Contact name	
Daytime telephone number including area code	
Evening telephone number including area code	
E-mail address	

H REGULAR WITHDRAWALS

This section should only be completed if you wish to take regular withdrawals (other than the fees to your financial adviser that you have requested us to pay) from your policy.

Please note that the minimum amount for any regular withdrawal payment, regardless of frequency, is £400 (or other currency equivalent).

Please note that there may be tax implications and the partial surrender will count towards the 5% tax deferred allowance. We suggest that you discuss the above with your financial adviser before selecting your option.

WITHDRAWAL AMOUNT

Please tick here to indicate which portfolio you wish your withdrawals to be deducted from;

Authorised custodian

Utmost International

If you have requested the withdrawals to be paid from an authorised custodian (subject to our agreement) please enter the details below:

Name of authorised custodian			
Amount to be withdrawn each yea	r		
or		_	
Percentage of premium to be with	drawn each year		%
Withdrawal frequency (\checkmark)	Monthly	Bi-Monthly	Quarterly
	Four Monthly (Termly)	Half-Yearly	Yearly
Date of first payment			d d m m y y y y

PAYEE DETAILS

Please select your preferred payment method:

Telegraphic Transfer	BACS direct credit
Please be advised that payments incur a bank transfer charge.	Only available for GBP payments paid to a UK, IOM or Channel Islands bank account.
	This payment method takes three working days to reach the account, but doesn't incur a bank transfer charge.

If no payment method is selected we will default to Telegraphic Transfer, unless you have requested GBP regular withdrawals payments, in which case we will default to BACS where possible.

▶ We will pay withdrawals to Policyholders only. Please note that third party payments are not permitted.

Do you want your withdrawals to be made to the same bank account detailed in Section F 'Source Yes No of Funds' (🗸)

If "No" please complete your chosen bank details below.

Until further notice, I/we would like regular withdrawals to be made to:

Bank account holder (name as stated on bank account)	
Bank account number/IBAN	
Sort code (applicable to UK accounts)	
SWIFT or BIC code (SWIFT code needed for bank accounts outside Europe; BIC code needed for European accounts with an IBAN)	
Bank name	
Bank address	
	Postcode
	Country

NUMBER OF POLICIES

Please enter the number of policies you would like

The number of policies cannot be changed after the International Wealth Bond is set up.

▶ If you do not specify the number of policies, we will issue 250. If you require more or less than the default, please provide details.

The number of policies selected can play an important role in the future if the policy is to be assigned. The minimum investment amount for each individual policy is £400 (US\$600, €600 or other currency equivalent).

J DECLARATION AND APPLICATION

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

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

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, 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 following declaration carefully. Any omission or misstatement of a material fact in this application could affect the payment of benefits under the International Wealth Bond. 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 we can assess its possible significance. If you become aware of such a fact while we are considering your application, you should notify us immediately.

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. 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 - BY EACH APPLICANT

A copy of this completed application form is available on request. References to the word '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 will be referred to as Utmost International throughout this declaration.

Declaration applicable to all applicants:

- 1. I understand and agree that I am applying to enter into a new contract (or a top up to an existing contract) with Utmost International, it will be subject to the law of the Isle of Man and the Policy Terms will be in the English language.
- 2. I request that the Lump Sum referred to as a Premium less any initial fee I have requested Utmost International to pay to my financial adviser is invested as an initial premium for policies comprising an Utmost International International Wealth Bond Life (ref IWBL) or Utmost International International Wealth Bond Redemption (IWBR) and I request Utmost International to issue the policies in my name, jointly with the other applicants, if any.
- 3. I authorise and request Utmost International to effect the facilitation of any initial fee to be taken before my investment is paid into the Policy, if applicable to my application, and I confirm that such payments will discharge Utmost International from all liabilities and claims arising from the payment of that initial fee. I understand that this authority supersedes any authority previously given.

- 4. I confirm that Utmost International has not provided any investment advice and I understand that the discretionary asset manager(s) appointed by Utmost International is responsible for the selection of assets to be linked to my Portfolio Fund. I acknowledge that Utmost International and the discretionary asset manager(s) are not responsible for the investment performance of any asset. The provider of the underlying assets is responsible for the management of any assets. Utmost International are responsible for carrying out a treasury function in respect of the Transaction Account held with Utmost International and Utmost International does not recommend any asset as a suitable investment.
- 5. I understand that the discretionary asset manager(s) may wish to invest into professional/non-retail type investment schemes and, if so, I accept the level of risk associated with these including the risk that the investment into such a scheme could result in a loss of a significant proportion, or all, of the sum invested.
- 6. I understand that in cases where the asset(s) the discretionary asset manager(s) has selected is/are not redeemable for a certain period of time, you 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 the discretionary asset manager(s) has chosen will give details if this applies. The discretionary asset manager(s) may invest immediately into non daily dealing funds which I understand 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 asset provider 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 a transfer of the ownership of that asset into the name of the Policyholder.
- 7. 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. I have not concealed a material fact. I agree to provide Utmost International with any further information in respect of this application on request.
- 8. I confirm that I have received a copy of the following items and I have had the opportunity to read them before reviewing and signing this application: Key Features Document for the International Wealth Bond and personal illustration, Wealth Bond (International and European) Product Brochure, Explaining your Bond fees and charges and the Policy Terms (ref IWBR) or (ref IWBL), Key Information Document (KID) for the policy.
- 9. I authorise and request Utmost International to effect the Regular Withdrawals or Part Surrender transactions on my policy to facilitate advice fees I have agreed to pay to my financial adviser in accordance with the details shown in Section D and/or to effect Regular Withdrawals as detailed in Section H, if applicable to my application, and I confirm that such payments will discharge Utmost International from all liabilities and claims arising from those payments, Regular Withdrawals or Part Surrenders.
- 10. For an application for the International Wealth Bond Life, I confirm that each life assured (or their parent where parental consent is required) consents to this application and there is insurable interest between the applicant and the life assured, and agrees to my acting as their agent for the purpose of the information provided in this application.
- 11. I confirm that I am not a resident of 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 International 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.
- 12. 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.
- 13. The application for an 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.

Additional declarations applicable to Corporate applicants:

16. I confirm that the Company has not been, or is not in the process of being dissolved, struck off, wound up or terminated.

Additional declarations applicable to trust applicants, including trust companies:

- 17. I confirm that the Trust Company has not been, or is not in the process of being dissolved, struck off, wound up or terminated.
- 18. We confirm that investment into the International Wealth Bond Life or International Wealth Bond Redemption is within the investment powers available to the trustees of the trust.

Please enter the country in which this application form was completed.

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

Did you complete this application form yourself? (\checkmark)

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

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.

	Applicant 1/Trustee 1/ Corporate Applicant 1	Applicant 2/Trustee 2/ Corporate Applicant 2	
SIGNATURE			
Date	d d m m y y y y	d d m m y y y y	

Further copies of the Policy Terms and/or this completed application form are available on request.

FOR ALL APPLICANTS - TO BE COMPLETED BY YOUR FINANCIAL ADVISER

NOTE

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 origin 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

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 you are unsure about a particular application, please contact your Utmost International business consultant in the first instance, or alternatively contact Utmost International's International Sales Support team directly on +44 (0)1624 655010.

L VERIFICATION OF CUSTOMER IDENTITY

Please send the following supporting documentation with your signed and completed application.

VERIFICATION OF CUSTOMER IDENTITY - FOR INDIVIDUAL INVESTORS

Please note we will not be able to issue your policy until the necessary identification documents have been provided.

We require one document from Part A and one from Part B below.

PART A - Individual whose identity is being verified

Valid in-date Passport

National ID card

PART B - Individual whose residential address is being verified

These must be less than six months old,

- > A recent utility bill (electricity, gas, water), rates or council tax bill (excluding mobile/cell phone bills)
- > A bank, mortgage or credit card statement (excluding store cards)
- > An extract from the official register of electors
- > State pension, benefit or other government produced document showing benefit entitlement
- > A recent tax assessment document
- > Proof of ownership or rental of the residential address

DOCUMENT CERTIFICATION

Certification must state "I certify this to be a true copy of the original" and include the date of certification, the Certifier's full name, signature and job title.

FURTHER DOCUMENTARY EVIDENCE

We may require further documentary evidence in addition to the documents already requested to support your application, particularly in relation to your country of residence and investment amount, before we can process the application. Your Financial Adviser can establish if further documentary evidence is needed by referring to our Origin of Wealth Guidelines or contacting us before sending in your application form.

Please enter what documentary evidence you are enclosing with this application form.	
(if applicable)	

NOTE

Please note that we will not be able to commence the policy 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.

Individual trustees

Enclosed (✓)

- 1. Verification of the identity and address of all individual trustees please complete parts A and B above.
- 2. Verification of the identity and address of the protector (where appropriate).
- 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. Please continue on a further sheet if necessary.

Capacity	Settlor/Donor	Protector	Beneficiary
Name			
Date of birth or death	d d m m y y y	Birth	Death
Residential address			
	Country	Р	Postcode
Capacity	Settlor/Donor	Protector	Beneficiary
Name			
Date of birth or death	d d m m y y y	y Birth	Death
Residential address			
	Country	P	Postcode
Capacity	Settlor/Donor	Protector	Beneficiary
Name			
Date of birth or death	d d m m y y y	y Birth	Death
Residential address			
	Country	P	Postcode
Capacity	Settlor/Donor	Protector	Beneficiary
Name			
Date of birth or death	d d m m y y y	Birth	Death
Residential address			
	Country	P	Postcode
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 in order to avoid delays on subsequent transactions where documentary evidence is required, e.g. for beneficiaries.

Corporate and corporate trustees

Enclosed (✔)

- 1. A list of directors' names.
- 2. Verification of the identity of at least two directors, one of whom must be an executive director.
- 3. A list of authorised signatories, specimen signatures and evidence of their signing power(s).
- 4. The corporate or corporate trustee's Certificate of Incorporation or other official registration document.
- 5. Evidence of the registered office of the corporate or corporate trustee.
- 6. Trading company a copy of the latest annual reports and accounts. Non-trading company - evidence of the origin of wealth.
- 7. Private limited companies verification of the identity of all shareholders holding 25% or more of the issued share capital as at the date of application. Where the shareholders are not individuals we will require verification of the identity of the ultimate beneficial owner of those entities and their relationship to the company.

All information should be provided on letterhead.

Confidentiality

Any information given by the client(s) or their Financial Adviser will be used solely by members of the Utmost Group of companies.

Verification of identity of individuals

We require one document from part A and one from part B. If neither document in part A is available, please provide two formal documents showing appropriate personal details and verifiable reference numbers from part B. Identification documentation must be current and valid. Evidence of address should be the latest available, but no more than six months old.

NOTE

Please tick (\checkmark) to indicate the identification you have supplied for each individual party to the bond. 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			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			
2.	Name			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			
3.	Name			
	Capacity			
	Type of document	Passport	National identity card	
	Document reference			

1

2

3

4

4. Name			
Capacity			
Type of document	Passport	National identity card	
Document reference			

PART A - REASON WHY DOCUMENTS ARE NOT PROVIDED (IF APPLICABLE)

PART B INDIVIDUAL WHOSE RESIDENTIAL ADDRESS IS BEING VERIFIED

These must be less than six months old

- 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

M FINANCIAL ADVISER/SUITABLE CERTIFIER DECLARATION

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 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.

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 International financial adviser account number	
	Financial Adviser
SIGNATURE	
Full name of financial adviser	
Financial adviser stamp	
Date	d d m m y y y