# SELECTION ADDITIONAL SINGLE PREMIUM INVESTMENT



# APPLICATION FORM FOR CORPORATE POLICYHOLDERS

### IMPORTANT NOTES

Ensure that all sections are fully completed. In this form words in the singular shall include the plural and vice versa.

#### BEFORE YOU BEGIN

Complete this form if you want to make an additional investment into your existing contract. Before completing this application form please ensure you have read the relevant **Product Guide**, your **Personal Illustration**, **Key Features Document** and our **Guide to Charges**. Your financial adviser will also be able to provide you with any relevant supporting literature in relation to your individual circumstances. The **Policy Conditions** and **Policy Schedule** detail the terms and conditions of the contract. Copies of all items are available from us on request.

#### HOW TO COMPLETE THIS FORM

This form has been designed for corporate policyholders only. Individual policyholders will need to complete the Additional Single Premium Application Form for Individual Policyholders of Selection.

Trustee and corporate trustee policyholders will need to complete the **Additional Single Premium Application Form** for Trustee and Corporate Trustee Policyholders.

If you are completing a hard copy of this form, please use **black or blue 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**.

This form is split into 3 sections for ease of completion. A summary of who should complete each section is outlined below:

- > Section 1: Additional Single Premium application policyholder must complete in all cases
- > Section 2: Identification requirements & financial adviser details financial adviser must complete in all cases
- > **Section 3:** Adviser charges **policyholder** should complete this section if they would like Utmost PanEurope dac to facilitate an initial adviser charge payment to the financial adviser as a deduction from the premium prior to investment.

**SIGNATURE** This symbol highlights the signature sections within this form which need to be signed (where applicable) by the policyholders or financial adviser.

- > Policyholders will need to sign page 20 in all cases
- > Financial adviser will need to sign page 24 in all cases.

#### PAYING FOR YOUR ADVICE

For corporate policyholders, we cannot facilitate any charges for advice once the premium has been invested. We will only facilitate initial adviser charges, to the financial adviser, outside the bond by deducting it from the payment you send to us, with the balance being invested as the additional single premium into the bond. Your existing investments and any existing commission paid to your financial adviser can continue unaffected.

Where you are requesting that we facilitate the initial adviser charge, you will need to complete the Adviser Charges section at the back of this application form to authorise us to make any adviser charging payments.

# A WEALTH of DIFFERENCE

www.utmostinternational.com

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

Utmost PanEurope dac is regulated by the Central Bank of Ireland (No 311420). Its registered office is 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.

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

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#### PRODUCT CHARGES - FLEX-CHARGE

Your additional single premium will be set up on our Flex-Charge basis. Our product charges have changed to take account of the introduction of adviser charging rather than commission and enhanced allocations. The charges for your additional premium may be different to those described in your original policy documentation and will be shown on the Additional Single Premium Statement that we will send to you.

For further details of adviser charging and our Flex-Charge please speak to your financial adviser or refer to our **Guide to Charges** available on our website **www.utmostinternational.com** or from your financial adviser.

#### IDENTIFICATION REQUIREMENTS

Under anti-money laundering regulations, we are required to verify the identity and address of all parties associated with the policy. The payment of an additional single premium represents a change to the policy, which requires us to bring evidence of verification of identity and address up to current standards.

If the application is being signed under a Power of Attorney, we will require a certified copy of the Power of Attorney document and the identity and address of the attorney will be verified as well as the policyholder. We will also need to know the reason for granting the Power of Attorney.

#### IMPORTANT INFORMATION ABOUT THIS CONTRACT

Companies holding contracts of life assurance are caught under the Loan Relationship Rules. Further information on this can be obtained from your financial adviser.

You need to satisfy yourself that, under any taxation, exchange control or insurance legislation to which you may be subject, you can take out this additional investment.

When you submit this application please ensure that you provide us with all residency and citizenship information by completing the separate **Tax Information Exchange Pack for Entities** available from our website **www.utmostinternational.com** or your financial adviser on request. Speak to your financial adviser if you have any questions about FATCA.

The contract for the additional investment could be invalidated by any failure to disclose facts which might influence our assessment of this application. If you have any doubt as to whether a fact is relevant then you should disclose it. Any additional information should be detailed in the notes section at the back of this form or on a separate sheet, dated and signed by the authorised signatories.

#### WHAT TO DO NEXT

Using the checklist on the final page please ensure you have completed all of the relevant sections and that you have attached any supporting documents to submit, including the separate **Tax Information Exchange Pack for Entities**.

Once complete, return this form along with any supporting documents to: **Utmost PanEurope dac, Navan Business Park, Athlumney, Navan, Co. Meath, C15 CCW8, Ireland**.

Alternatively, completed forms and supporting documentation that are digitally signed and/or scanned, can be emailed to us at **info@utmostwealthsolutions.ie** 

# SECTION 1 - POLICYHOLDERS MUST COMPLETE IN ALL CASES

	CONTRACT DETAI	LS									
1	We apply to increase the ex	xisting inv	estment	under the p	olicy nu	umbered	d				
2	Provide a copy of the Perso	onal Illustra	ation tha	nt you have b	peen giv	ven or ei	nter yo	ur Pe	rsonal	Illustra	ation
	reference number here			_							
3	Welcome team ticket refere	ence									If the Welcome team produced a
											Personal Illustration for you, a Welcome team ticket reference
											can be found at the top of page one.
	Bond charge -			(Flass C	N N	- ·- <b>+</b> : - ·- 0					The product Q
	What is your chosen <b>produc</b>	ct manage	ment cn	arge (Flex-C	_						charge for each new premium is based on
	Full initial charge		Full ong	going charge	e th	ote that is is not the dviser char					the total premiums paid, therefore an
					(p	lease see p 5-26 for mo	pages				additional premium may have lower
	Combination of initia	al and ong	oing			etails of ad narges).	lviser				charges than the initial premium.
	If you choose a combination	n of an initi	al and o	ngoing prod	duct ma	nageme	ent chai	rge,			
	enter your chosen combina	tion to a m	aximum	of 3 decima	al places	S:					
	% Initial	%	Ongoin	ıg (per annu	m)						
No	Note that the Personal Illustration provided to you should match the investment details mentioned in this application. If there have been any changes in the investment details between the date of that illustration and the submission of this additional application, ask your financial adviser for an updated illustration.										
in tha	this application. If there havat illustration and the subm	ve been an	y chang	es in the inv	estmen	t details	s betwe	een th	e date	of	
in th	this application. If there havat illustration and the subm	ve been an ission of th	y chang nis addit	es in the inv ional applic	estmen	t details	s betwe	een th	e date	of	
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Urr wir us fur po Ccc a F	this application. If there has at illustration and the submer updated illustration.  POLITICALLY EXPONENTS AND ADDRESS AND ADD	Je been an ission of the OSED PE laundering d be classed to is current or example Judiciary of the per of a Ceper of a Ceper in their ow of any property of the control of	RSON!  g obligated as a Pitly, or have a Heacor the Millintral Bair rown ricepersons	es in the invioual applic  stions we are olitically Expas previously dof State, a litary, a senionk. Immedia ght.	require cosed Po y been, nolder cor emplo te famil	d to ider erson (Plentruste of a senic byee of a y memb	ntify pe EP). A fed with or polit a State pers or o	erson: PEP is prom ical o Owne	s associa terminent proposed associaned al	e of or ciated public rnmen ates of	separate document entitled 'Politically Exposed Persons' which is available from your financial adviser who can obtain this on
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# CORPORATE POLICYHOLDERS

РΑ	RT 1 - COMPANY DETA	AILS	
1	Company name		
2	Company registered number		
3	Registered residential address (PO Boxes and 'care of' addresses are not acceptable)		
	Postcode		
4	State the jurisdiction in which the company is liable for tax		
5	Correspondence address (in full)		
	Postcode		
6	If the correspondence address is different from the registered address, give a reason		
7	Is this investment in respect of employee benefits?	Yes No	
8	Is the company an investment company controlled by persons residing in the UK?	Yes No	Note that for this purpose, a holding company or a collective investment scheme
9	Is the company a trading company? If yes, state its main business	Yes No	is not an investment company.
10	Have there been any material changes in respect of the company such as change of jurisdiction, change of name or change of directors which you have not already told us about?  If yes, provide further details	Yes No	
11	Is the company in the process of being dissolved, struck off, wound up or terminated?	Yes No	
12	Is the company quoted on a recognised stock exchange? If yes, which one?	Yes No	

C CORPORATE POLICYHOLDERS' DETAILS

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# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT

# CORPORATE POLICYHOLDERS

13	Has the company been established or owned by a Government Department, Political Party, Local Council Authority, Trade Union or State Owned Industry?  If yes, provide description		Yes			No										See our separate document entitled 'Politically Exposed Persons' which is available from your financial adviser who can obtain this on our website www. utmostinternational.com
P R	OVIDE DETAILS OF TH	IE C	COM	1PA	NY	'S N	MAI	N B	ΑN	ΚΑ	CC	ΟU	ΝT			
1	Account name															
2	Account number															
3	Bank sort code			_			] –									
4	Building Society roll number (if applicable)															
5	Bank BIC/Swift code (required for all banks outside the UK)															
6	IBAN (required for all bank accounts in the EU)															
7	Bank/Building Society name															
8	Address								-							
	Postcode					_										
9	Telephone number (including international dialling code)															
10	How long has the account bed	en he	eld?				Yea	ars								
(u	ttach a certified copy of the Conless previously provided) ttach a certified copy of the la							count	ts.						Attac	These can be certified by the financial adviser.

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## PART 2 - COMPANY DIRECTORS

List all the current directors of the company (continue as necessary on a separate sheet).

Full name	Date of birth Home postcode											
1	d	d	m	m	У	У	У	У			-	
2	d	d	m	m	У	У	У	У			-	
3	d	d	m	m	У	У	У	У			_	
4	d	d	m	m	У	У	У	У			_	
5	d	d	m	m	У	У	У	У			-	
6	d	d	m	m	У	У	У	У			-	

From the list, please supply the details of two directors, including at least one executive director, and provide suitable verification of identity and residential address.

		Executive Directo	or	Director	
1	Title (Mr, Mrs, Miss or Other)				
2	Gender	Male	Female	Male	Female
3	Surname				
4	Maiden name or any previous names (if applicable)				
5	Forenames (in full)				
6	Permanent residential address (PO Boxes and 'care of' addresses are not acceptable. If you are an individual acting on behalf of a company (e.g. a law firm), enter your own residential address here. Provide your company address in the Notes section of this application form.)	Deitich	_	Prinish	_
7	Nationality	British		British	
	Other (please state)				
8	Date of birth	d d m m	у у у у	d d m m	у у у у
9	Country of birth				
10	Position/Job title				

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

AUTHORISED SIGNATORIES		
Attach a certified copy of an authorised signatory list	Attached	These can be
For public registered companies, attach a certified copy of the Board Resolution appointing the authorised signatories	Attached	certified by the financial adviser.
Confirm the minimum number of authorised signatories that will be required to sign the Declaration in section I.	(number)	

#### PART 3 - SHAREHOLDERS

For private companies, please list all shareholders holding 25% or more of the issued share capital at the date of the application.

Name	% share	Dat	te of	birt	<b>h</b> (if i	ndivi	dual	)		Hon	ne p	osto	ode	(if inc	lividua	)
1		d	d	m	m	У	У	У	У					-		
2		d	d	m	m	У	У	У	У					_		
						1						1				
3		d	d	m	m	У	У	У	У							
					I	1		T				1				
4		d	d	m	m	У	У	У	У					-		
					I	I	ı	T	1			ı				
5		d	d	m	m	У	У	У	У					-		
			T	1	I	ı	ı	T	T			ı				
6		d	d	m	m	У	У	У	У					_		
_			Ι.	I				1	I							
7		d	d	m	m	У	У	У	У					-		
								I	T							$\vdash$
8		d	d	m	m	У	У	У	У					-		
9		d														
7		d	d	m	m	У	У	У	У					-		
10		d	d	m	m	V	V							_		
			u u	1 '''		У	У	У	У							

The verification of identity of the above shareholders will be required in line with that for individuals, trustee or corporate applicants (as applicable). Full details of these requirements are available from us, or on our website www.utmostinternational.com.

Where there is a corporate shareholder, complete a further corporate application form providing all the relevant details. If any of the shares are held within a Trust, complete a Trust application in respect of that Trust. Ensure the declaration sections are also completed.

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#### ADDITIONAL INVESTMENT AMOUN

MANDATORY

#### 1. ADDITIONAL SINGLE PREMIUM AMOUNT

Please confirm the amount of the premium in the currency of the bond.

Speak to your financial adviser for details of the minimum additional single premium amount applicable to your policy.

The additional premium must be paid to Utmost PanEurope dac in the same currency as the bond by Telegraphic Transfer (international payment). If the payer of the premium is not the policyholder then we will need to know why a third party is making the payment, and will normally require verification of the identity of the payer. Third party premium payments are subject to our approval.

If you ask us to facilitate an initial adviser charge to your financial adviser before the premium is invested, the amount you send to us must total at least the minimum additional single premium amount as stated in the product literature, plus the agreed initial adviser charge. Speak to your financial adviser for the current minimum amounts.

Once your premium has been received in our bank account, if any interest is earned on your premium before the additional single premium is issued, an extra allocation of units may be added to your investment at the time the additional single premium is issued. Please note that in times of low interest, it is possible no extra units will be applied.

Important Note: your additional single premium will not start until we have received all outstanding requirements, including cleared funds.

To pay by Telegraphic Transfer (international payment), contact your bank separately to send the payment to us. Our bank details are below, ensure that the payment is sent DIRECT to Utmost PanEurope's bank account.

We will only make payment of any initial charges for advice to your adviser once the additional application and any additional supporting documentation has been fully accepted by us. No interest will be paid on any adviser charges being facilitated by us to the financial adviser outside of the bond.

#### 2. OUR BANK DETAILS

#### FOR PAYMENTS SENT IN GBP

Address Citibank Europe Plc, 1 North Wall Quay, Dublin 1, Ireland

Swift code CITIIE2X Sort code 99-00-51

IBAN IE22CITI99005127954790

Account number 27954790

Account name Utmost PanEurope dac Premium GBP

#### FOR PAYMENTS SENT IN EUR

Address Citibank Europe Plc, 1 North Wall Quay, Dublin 1, Ireland

Swift code CITIIE2X

**IBAN** IE44CITI99005127954782

Account number 27954782

Account name Utmost PanEurope dac Premium EUR

#### FOR PAYMENTS SENT IN USD

Address Citibank Europe Plc, 1 North Wall Quay, Dublin 1, Ireland

Swift code CITIIE2X

IBAN IE32CITI99005127954804

Account number 27954804

Account name Utmost PanEurope dac Premium USD

Ensure you clearly reference your policy number or client's name on the bank payment.

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

#### 3. YOUR BANK DETAILS

We need to know which bank account the premium has come from. This is for regulatory purposes and does not instruct your bank to pay the money to us. Complete the details below.

1	Account name										
2	Account number										
3	Bank sort code		_		_						
4	Building Society roll number (if applicable)										
5	Bank BIC/Swift code (required for all banks outside the UK)										
6	IBAN (required for all bank accounts in the EU)										
7	Bank/Building Society name										
8	Address										
	Postcode			_							
9	Telephone number (including international dialling code)										
10	How long has the account be	en held	l?		Yea	rs					

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	MANDATORY									
so	Confirm the sources of the investment. Tick the appropriate boxes and enter the percentage from each source. Then answer the relevant questions below. If necessary, continue on a separate sheet of paper, sign the sheet and attach it to this form.									
Sc	ources		Tick box	%						
1	Maturing investments or police	cy claims			Give as much detail as possible about the source of your investment					
2	Share sale				as insufficient information at					
3	Property sale				outset may delay the additional investment being invested.					
4	Company sale or sale of inter-	est in the company			mvested.					
5	Loan									
6	Compensation payment									
7	Company profits (trading comp	panies only)								
8	Other income sources									
ve Al se If i	rifying the answers to the source I investments are assessed on a ction we may request evidence it is unclear how the money was	case by case basis; depending on the a	nswers provided formation. If you r	in this	information boxes found throughout the following section for examples of the additional documentary evidence we may require.					
1	Maturing investments or poli	cy claims								
а	From which company did the proceeds come?				Examples of original certified					
b	How much was received?				documentary evidence:					
С	When were the proceeds received?	d d m m y y y y			> Letter/contract note from					
d	If the proceeds were received over three months ago, where have they been held since then?				previous investment company giving notification of proceeds of maturing					
е	How long was the investment/policy held?				investment/claim.					
f	If the investment was held for less than five years, where were the funds held previously?									

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

2	Share sale		
а	What shares were held?		Examples of original certified documentary evidence:
b	How much were the proceeds of the sale?		document, e.g. contract notes.
c	How were they sold? (i.e. through a bank, stockbroker or other agent)		
d	Provide their name and address		
	Postcode		
е	When were the shares sold?	d d m m y y y y	
f	If the proceeds were received over three months ago, where have they been held since then?		
g	How long were the shares held?		
h	If the shares were held for less than five years, where were the funds held previously?		
3	Property sale		
а	What was the address of the property sold?		Examples of original certified documentary evidence:  > Signed letter
	Postcode		from solicitor that includes the proceeds received,
b	How much was it sold for?		or > Completed sale
С	Dates of purchase and sale	Purchase d d m m y y y y	contract.
		Sale ddmmyyyyy	
d	If the proceeds were received over three months ago, where were they held?		
е	If the property was held for less than five years, where were the funds held previously?		

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### APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT

# CORPORATE POLICYHOLDERS

# 4 Company sale or the sale of interest in the company

а	What was the name and address of the company?		Examples of original certified documentary evidence:  > Signed letter
	Postcode		from solicitor or regulated
b	What is the company registration number?		accountant, or  Copy of contract sale and sight
С	When was the company sold?	d d m m y y y y	of investment monies on bank statements.
d	If the proceeds were received over three months ago, where have they been held since then?		statements.
е	How much were the proceeds of the sale?		
f	How much did the beneficial owner receive?		
g	What was the nature of the company's business?		
5	Loan		
а	Why was the loan required?		Examples of original certified documentary evidence:  > Loan agreement, stating the name
b	How much was it for?		and address of the applicant; date
С	What was the date of the loan?	d d m m y y y y	of the loan and how much it was for. It should be
d	Who provided the loan?		clear who the loan provider is, or
е	Provide their name and address  Postcode		> Recent loan statements dated less than six months old which shows the applicant's name and address.

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT

# CORPORATE POLICYHOLDERS

6	Compensation payment		
а	Who did the payment come from?		Examples of original certified
b	How much did the company or the beneficial owner receive?		documentary evidence:  > Letter/court
С	When was it received?	d d m m y y y y	order from compensating
d	Where have the proceeds been held since the payment was received?		body, or  > Solicitor's/ Advocate's letter.
е	What was the reason for it?		
	Company profits (trading com	panies only) est available annual report and accounts; or  Attached	
t	wo years.	tant giving details of company profits over the last Attached	
8 a	Other income sources What type of income was this?		Examples of original certified
b	How much was it?		documentary evidence:
С	When did the company or beneficial owner receive it?	d d m m y y y y	<ul><li>Appropriate supporting documentation, or</li></ul>
d	Where did the income come from? If a full and detailed explanation is not provided this will result in a delay in the		<ul> <li>Signed letter detailing funds from a regulated accountant.</li> </ul>
	investment. One word answers are not acceptable. For further information on source of wealth speak to your financial adviser.		
е	If the income was received over three months ago, where has it been held since?		

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### CORPORATE POLICYHOLDERS

F INVESTMENT OPTIONS

**MANDATORY** 

# PART 1 – NOMINATION OF EXTERNAL MANAGER AND/OR CUSTODIAN (EMC) OR INVESTMENT ADVISER

#### A) Is your policy to be managed by an EMC?

If **no**, see section B below.

If yes, a fund choice is not required. If you wish for your investment to be managed by an EMC already linked to your policy, supply details of the EMC including contact telephone number and contact name (if any).

Name of firm									
Contact telephone number									
Contact name (if any)									
How much of this additional single premium would you like to									
invest with your existing EMC?									

If you would like request the appointment of a new EMC, ensure that you have completed the separate **Nomination of External Manager and/or Custodian Form**. This form is also available from your financial adviser or from us on request.

#### B) Do you wish to nominate an Investment Adviser to choose or change the investments?

If 'no', outline your initial fund selection in part 2 below.

If 'yes', in addition to completing part 2 outlining your fund choice, you will also need to complete a separate **Nomination of Investment Adviser Form** available from either your financial adviser or on request from us.



We are unable to facilitate the payment of charges for advice from the value of the bond for corporate clients. Therefore, charges applicable for advice provided on the underlying investments by an Investment Adviser or EMC must be paid directly by you to the relevant party outside of the bond.

In addition, on adding a further investment into an existing External Managed Account, all investment advice provided by an EMC, including that related to the original premium will be treated as an advice charge. You will also need to pay this direct to your EMC.

#### PART 2 - FUND SELECTION

You are able to choose numerous external funds and cash deposits to be linked to the bond. Refer to our website www.utmostinternational.com for details of the funds available.

The minimum investment amounts vary according to the fund manager. Your investment will be governed by the rules of the underlying investment as applied by the fund or deposit provider.

Where relevant, we will purchase accumulation units unless otherwise instructed. If income units are selected, the fund manager will be requested to pay all income as cash which will be credited to the Dealing Account.

It is important to write the percentage of the net premium to be invested in each chosen fund, after any initial adviser charges for the financial adviser have been deducted if applicable, rather than a monetary amount.

### FUND SELECTION

Refer to our website www.utmostinternational.com for details of the funds available and the relevant SEDOL or ISIN codes. Ensure that the full fund name and SEDOL or ISIN codes are provided as any missing information will result in a delay in investment.

Certain funds require completion of the **Investor Declaration Form** which is available from your financial adviser on request. Contact our Customer Service team on **+44 (0) 203 038 3941** if you need more information.

Fund name (please give full fund name)	SEDOL/ISIN/ FUND REFERENCE			

#### CASH DEPOSITS

Refer to your financial adviser for details of the cash deposits currently available.

Bank/Building Society	Full name of deposit account	%		

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# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

#### DEALING ACCOUNT

All transactions (including charges and withdrawals) will go through the Dealing Account and it may become overdrawn from time to time. In these circumstances we will sell sufficient funds to clear the negative debit balance.

Indicate in the box below which funds you would like us to sell in these circumstances.

f no funds are selected, we will automatically sell units from the fund within the portfolio which is redeemable and has t nighest value at the time of sale.	:he

Q

If you choose an external fund to clear a negative debit balance, each sale will be subject to the prevailing dealing fees.

**OPTIONAL** 

Complete this section if you want to set up regular withdrawals.

Regular withdrawals will be taken equally across all policy segments.

Minimum £200 per payment (or currency equivalent). Payments will only be made in the currency of the bond.

If a regular withdrawal would take the bond to a surrender value lower than the minimum value required to be kept in

ill		If you have opted for an end date on your client Personal Illustration, note that this is for you wish for withdrawals to stop, we will require an instruction at that point to be sent to <b>Putmostwealthsolutions.ie</b>	
SI	ET UP WITHDRAWALS		
		ly taking regular withdrawals from your bond and want to start. Your instructions will be uding this additional investment.	
1	Amount to be withdrawn from the whole bond	per annum of premium per payment  % or	
2	Frequency of payments	Monthly Quarterly Half-yearly Yearly	
3	Payment to start	d d m m y y y y  The earliest the first withdrawal can be taken is 30 days after the additional single premium documents have been issued.	2
B	ANK DETAILS		
lf	you want to start withdrawal p	payments, complete this section.	

Payment method will be BACS transfer for sterling payments to UK clearing banks only or Telegraphic Transfer (international payment) for other currencies or banks outside the UK. A charge will be levied by our bankers for Telegraphic Transfer payments and this will be deducted from the value of the bond.

#### PROVIDE DETAILS BELOW OF THE ACCOUNT THAT YOU WANT PAYMENTS TO BE SENT TO:

1	Account name										
2	Account number (for BACS payments this must be 8 digits)										
3	Bank sort code		-		_						
4	Building Society roll number (if applicable)										
5	Bank BIC/Swift code (required for all payments outside the UK)										
6	IBAN (required for all payments to the EU)										
7	Bank/Building Society name										
8	Address										
	Postcode			_							
9	Telephone number (including international dialling code)										
10	How long has the account been he	ld?			Yea	ırs					

Payments to third parties are not normally allowed. However, in exceptional circumstances, they may be considered. We will need to know why the payments are required, details of the relationship between the policyholder and account holder, plus certified identification for the account holder, which is listed in section J.

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### H PRIVACY NOTICE

Our Privacy Notice 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 on our website <a href="https://www.utmostinternational.com/privacy-statements">www.utmostinternational.com/privacy-statements</a> or you can contact our Customer Service Team on +44 (0) 203 038 3941 and request a copy.

# DECLARATION

This is our standard client declaration upon which we intend to rely. For your own benefit and protection you should read these terms and the Data Protection notes section of this form carefully before signing below.

Read carefully the Product Guide, Guide to Charges, a Personal Illustration and Key Features Document, all of which should have been provided to you, as they contain important information about the bond.

If you do not understand any part of these terms, the Data Protection notes or the product literature listed above, ask your adviser to explain it to you before signing below.

In this declaration, "we", "us" and "our" mean the corporate applicants, its officers and/or authorised signatories and "the Company" means Utmost PanEurope dac.

We apply for an additional investment into our existing contract in accordance with the Policy Conditions and Policy Schedule.

We hereby confirm that we have not relied upon any statement made by our financial adviser which is not supported in the literature.

We confirm and declare that we have been advised to obtain appropriate professional advice in respect of the applicable taxation requirements, effects and legislation.

#### ANTI-MONEY LAUNDERING AND TAX EVASION PROVISIONS

### Source of Funds - Policyholder Statement of Truth

#### We truthfully confirm that:

- i) all funds invested in the bond applied for have been or will be properly declared to the relevant tax authorities in the jurisdiction of our tax residence and/or any other jurisdictions as necessary or appropriate in accordance with applicable laws and regulations, and
- ii) none of the funds invested derive, directly or indirectly, from illegal activities or sources and/or tax

Potential consequences of misleading the Company - We fully acknowledge and agree that if the Company discovers that we misled the Company in respect of any part of the statements confirmed above, that the Company shall, to the fullest extent permitted by applicable law and regulation, without limiting the Company's legal remedies or options, have the contractual ability to:

- i) terminate the bond immediately and, regardless of the actual date of bond termination, impose the maximum encashment and any other relevant charges which may be imposed on us under the bond as if the bond had been encashed immediately after issue. Such charges shall be applied to the extent that they cover any costs, expenses or losses caused by the Company being misled, without limiting the Company's ability to seek additional recompense from us in respect of any shortfall.
- ii) notify relevant government authorities and provide all information considered necessary or appropriate at the Company's discretion concerning us and/or the bond; and
- iii) if considered appropriate after consultation with government authorities and/or legal counsel, either
  - a) subject to satisfying the Company's further reasonable requirements, refund our premium(s) and other amounts paid to the Company to the date of such termination less applicable encashment and other charges in accordance with clause (i) above (the 'Refund Amount'), or
  - b) if legally required to do so by competent government authorities, freeze or pay over to relevant government authorities all or a portion of the Refund Amount or take such other actions as competent government authorities may legally require.

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

#### Consent to disclose information to Tax and other Government Authorities

We have been advised that Utmost Group plc and the Company have a longstanding policy of cooperating with tax and other government authorities to combat money laundering, tax evasion or other illegal activities.

We consent and agree that in cases where the Company suspects that the funds invested in the bond are wholly or partly derived from illegal activities/sources and/or tax evasion, then the Company shall, to the fullest extent permitted by applicable law and regulation, without limiting the Company's legal remedies or options, have the ability to disclose to our home country tax and/or other government authorities our identity and any relevant information considered necessary or appropriate, at the Company's discretion, concerning the bond.

We understand and agree that the company's obligations under the policy, including the payment of benefits, will be suspended either in whole or in part, to the extent that performance of any policy obligation may expose the company to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanction, laws or regulations of the European Union, United Kingdom or United States of America.

### Further consents and confirmations

We hereby confirm that all the information that we have provided, whether handwritten or otherwise, in this application form is complete and accurate to the best of our knowledge and belief. We agree that this information, together with all other questionnaires, statements, reports or other information completed or given by us in our name, shall form the basis of the contract with the Company.

We understand that this contract is of the utmost good faith and that if it subsequently comes to light that any information supplied to the Company by us or on our behalf was misleading or incomplete, then this might invalidate our contract and adversely affect our right to the payment of policy benefits. We understand the requirement to provide accurate and relevant information in my dealings with the Company is continuous and binding upon us or any subsequent holder of the policy.

**We understand** that no contract shall be issued in respect of this application and the Company shall be under no obligation in respect of this application until the first premium has been received by the Company and the Company has expressly confirmed in writing that it accepts the application.

**We accept** that selection of investments is our responsibility (or, where appropriate, that of our Investment Adviser or any appointed EMC) and the Company makes no representations or guarantees in relation to the future performance of any assets linked to the bond and accordingly has no legal responsibility in respect of future performance of such linked assets.

We understand that both we and the Company have a free choice about the law that can apply to any contract relating to this application. The Company proposes to choose the laws of England and Wales and by completing this application form we agree that the laws of England and Wales shall apply and that the Courts of England and Wales shall be the sole forum to consider disputes in relation to any contract arising from this application.

**We agree** that any decision to alter the Courts of England and Wales jurisdiction shall be at the discretion of the Company such discretion being exercised reasonably.

**We agree** that a copy of our agreement given in this Declaration will have the validity of the original. We understand that the financial adviser is acting as our agent and not an agent of the Company.

We confirm that the corporate applicant(s) has the power to enter into the contract applied for.

**We confirm** that we are not ordinarily resident in Ireland and we are tax resident (that is normally live) in the UK, and confirm that, to the best of our knowledge, it would not be unlawful to proceed with such an investment. We hereby undertake to inform the Company of any change in our country of residence during the lifetime of the bond.

We further confirm and declare that the corporate applicant is liable for tax in the jurisdiction entered in section C on page 4 of this application form.

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# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

Role			Please confirm Q what role you
SIGNATURE			are completing this application in i.e. Director or Authorised Signatory.
Print full name			
Date	d d m m y y y y	d d m m y y y y	
Role			
SIGNATURE			SIGNATURE
			If there are more than
Print full name			four signatories photocopy this page and after signing the additional copies
Date	d d m m y y y y	d d m m y y y y	attach securely to the form.

Once you have signed and dated the above boxes and your financial adviser has completed pages 21-24, go to page 25 if you would like us to facilitate the initial adviser charge payment, to your financial adviser, outside of the bond.

### SECTION 2 - FINANCIAL ADVISER MUST COMPLETE IN ALL CASES

#### IDENTIFICATION REQUIREMENTS

**MANDATORY** 

Under anti-money laundering regulations we are required to verify the identity and address of all individuals related to a contract (e.g. directors, shareholders, and any third party). For trustee shareholders we are required to verify the identity and address for all trustees together with satisfactory evidence of proper appointment of the trustees.

This information is required to satisfy antimoney laundering regulations.

Outlined below are the standard minimum requirements, however we may, in some circumstances, require additional information.

Director(s) and individual shareholder(s) - We require a suitably certified copy document from Part 1 together with a suitably certified copy document from Part 2. If an individual does not hold either of the documents listed in Part 1 then, under certain circumstances, we may be able to accept two suitably certified copy documents from Part 2, showing verifiable reference numbers. Also note that if no documentation is supplied from Part 1, we need a reason why this is not available.

**The company** - for verification of the company see **Part 3**. All documentation in this section must be supplied.

Tick in the boxes below to indicate the identification you have supplied for each party to the policy.

PARI I - PERSUNAL IIJENITIY	ovide one Q cument from
Executive doc Director Director * * Part	rt 1 PLUS one cument from rt 2. Alternatively, ovide two
1 Valid passport	cuments from rt 2 and confirm
2 National ID card (with photograph)	y ID from Part 1 nnot be provided. ways provide
	ginals or originally rtified copies.
*Complete for any other party to the application e.g. shareholders who are individuals and hold 10% or more of the issued share capital. Continue on a separate sheet of paper should there be more individuals to be identified than the space provided.	
If you cannot supply an item from <b>Part 1</b> , tell us why in the box below.	

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## PART 2 - VERIFICATION OF ADDRESS

	Executive Director	Director	*	*	
1 A recent utility bill dated and certified within the last six months. The document must be the most recent available and no more than six months old, and must also be certified. (Mobile phone bills are not acceptable)					
<b>2</b> A recent mortgage statement, giving the residential address					
3 A current driving licence (With photograph) Note that if the driving licence is being used in Part 1 it cannot be used in Part 2 and vice versa.					
<b>4</b> A state pension, benefit or other government produced document showing benefit entitlement					
<b>5</b> A recent tax assessment document					
<b>6</b> An account statement from bank or bank credit which is no more than six months old and certified (Store cards are not acceptable)					
7 Proof of ownership or rental of the residential address					
If there are other parties to the ap enclosed a list of copy evidence a originals of such evidence? (Ensure that any separate list quotes the	nd can you conf	irm that you ha	ve seen the	Yes	Where relevant, Q tick this box.
PART 3 - CORPORATE VEI	RIFICATION				
SUPPLY ALL OF THE FOLL	OWING DO	CUMENTS			
A Certificate of Incorporation			set of the latest an accounts	inual report	
Evidence of the registered addres	ss	Ar	authorised signa	tory list	
A certified copy of the Board Reso (for public registered companies of		g the authorise	d signatories		

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT

## CORPORATE POLICYHOLDERS

The following declaration must be fully completed in all cases, this method of certification is required for Utmost PanEurope dac's regulatory purposes.

101	othost i an Europe dad's regulatory purposes.			
l c	onfirm that:			
a)	I have had sight of the original documents and all documents enclosed herewith are true copies of the original and are hereby certified accordingly.	Yes	Please tick the box.	Q
b)	the information in section J was obtained by me in relation to the applicant.	Yes		
c)	where I have an existing relationship, the applicants' account/relationship has been conducted satisfactorily.	Yes		
d)	I am not aware of any reason why this application should be refused.	Yes		
e)	I am unaware of any activities undertaken by these applicant(s) which lead me to suspect that they are involved in any form of criminal activity and/or money laundering.	Yes		
f)	I shall inform you immediately if I suspect such activity.	Yes		

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# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

K	INTRODUCER'S DETA	AILS	MANDATORY
1	How and when were you introduced to the policyholders?		
2	Are the policyholders acting as a nominee for someone else? (If yes, provide details)	Yes No	
3	Which country was the advice leading to this application given in?		
4	Which country was this application signed in?		Provide full Q details.
5	The basis on which the advice was offered is (UK advisers only)	Independent Restricted	
6	Name of regulatory body		Provide full
7	Regulatory body membership number		details of your authorisation and FCA number.
8	Certifier and authorised signatory SIGNATURE		SIGNATURE
9	Print full name		Sign data
	Date Financial adviser company	d d m m y y y y	Sign, date and stamp in the spaces provided.
•••	name and address (company stamp if possible)		If no company stamp is available, write in the company address.
12	Utmost PanEurope dac terms of business number (if known)		
13	Provide the name of your Utmost sales representative		

Note that we will not be able to invest the additional premium until sections  ${\sf J}$  and  ${\sf K}$  have been completed and identification provided.

# SECTION 3 – POLICYHOLDER MUST COMPLETE IF THEY WOULD LIKE UTMOST PANEUROPE DAC TO FACILITATE AN INITIAL ADVISER CHARGE PAYMENT TO THE FINANCIAL ADVISER BEFORE THE PREMIUM IS INVESTED.

#### L ADVISER CHARGES

OPTIONAL

Due to possible tax implications, corporate applicants can only choose to pay adviser charges directly to their adviser or outside of the bond. This charge should match the information shown in your Personal Illustration that will have been provided to you. The option to pay from inside the bond is not available.

#### ADVISER CHARGING

This section should only be completed if you wish for us to facilitate the payment of the initial adviser charge to your financial adviser outside of the bond by taking it from the initial payment, with the remaining balance being invested as an additional premium into the bond.

Ensure you fully complete this section, as any omissions may delay our ability to carry out your instructions. Once we have received the application form with this section fully completed, we will make an adviser charge payment on your behalf to your financial adviser for the services they provide to you.

#### CANCELLATION OF ADVISER CHARGES

If you decide to cancel your bond during the cancellation period (see the Key Features Document for details) any refund to you will be less any adviser charges paid on your behalf. If you believe you are due a refund of such payments from your adviser, you will need to contact them direct to discuss the exact terms of the adviser charging arrangement you have with them.

11	NITIAL ADVISER CHARGE		
1	Specify the amount as a monetary figure:	This amount should be specified	Q
	Monetary amount (£/US\$/€)	excluding VAT.	
2	Does the initial adviser charge attract VAT? Yes No		
	(If yes, this will be applied in addition to that stated in <b>question 1</b> of this section)		

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#### CORPORATE POLICYHOLDERS

### Μ

#### ADVISER CHARGING DECLARATION

Read this section carefully before you sign it as it affects your rights and creates a legally binding agreement with Utmost PanEurope dac in connection with your bond. If you do not understand any aspect of this agreement ask your adviser to explain its effect to you before you sign the form.

Throughout this declaration, 'we' 'us' and 'our' mean the applicant and 'the Company' means Utmost PanEurope dac.

We authorise the Company to make the adviser charges payment as set out in this Agreement.

Where we request the Company to facilitate an adviser charge payment outside of the bond, we agree and acknowledge that:

- > The facilitation is in consideration of our application for an additional single premium
- > The payment is subject to the application being accepted
- > Should the application not proceed then we will be refunded the premium together with the adviser charge and it will be our responsibility to settle any outstanding adviser charges, if any, with our adviser
- > No interest is payable or owed in respect of adviser charge money held by the Company to either us or our adviser
- > The adviser charge relates to advice received in connection with the additional single premium.

#### By signing this form below we confirm that:

- > The adviser charges set out in this form match the Personal Illustration we have received from our adviser
- > It will create legally binding obligations on us in connection with our bond.

#### **Directors/Authorised signatories**

Role SIGNATURE			Please confirm what role you are completing this application in i.e. Director or Authorised Signatory.
Print full name			
Date	d d m m y y y y	d d m m y y y y	
Role			
SIGNATURE			SIGNATURE
Print full name			If there are more than four signatories photocopy this page and after signing the additional copies
Date			attach it securely to the form.

Ensure your financial adviser has completed and signed section K (page 24).

# APPLICATION FORM FOR ADDITIONAL SINGLE PREMIUM INVESTMENT CORPORATE POLICYHOLDERS

N NOTES	
O CHECKLIST	
We want to process your application as quickly as possible. To help us do this remember that on completion of this will need the following:	s form we
Certified copies of the identification and address verification documents of all individuals related to the contra (e.g. directors, shareholders, and any third party)	ct
A separate Tax Information Exchange Pack for Entities, suitably completed and signed	
If you would like us to facilitate an initial adviser charge payment to your adviser for the advice and service in relation to this bond, please complete and sign Section 3, Adviser Charges, on page 25-26	
If you would like to request the appointment of an Investment Adviser, then enclose a fully completed and sign <b>Nomination of Investment Adviser Form</b> , which is available from us or your financial adviser on request	ned
If you are sending any additional instructions or documentation, attach them securely to the back of this form	
When payment by Telegraphic Transfer (international payment), please contact your bank separately to send the payment to us.	

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