LIFE ASSURANCE

PERSONAL INVESTMENT MANAGEMENT SERVICE

PENSION TRUSTEE APPLICATION FORM

RL360°

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COMPLETION

Please complete this form using BLOCK CAPITALS throughout. Please tick boxes where applicable and follow the instructions provided in each section. Please use Section 10 - Application Checklist before submitting your application, to make sure that you provide us with everything we need to process your application.

US Specified Person means a US citizen or tax resident individual, who either holds a US Passport, a US Green Card, has a US residential/correspondence address or who was born in the US and has not yet renounced their US citizenship. More information on US FATCA can be found at www.irs.gov/businesses/corporations/foreign-account-tax-compliance-act-fatca.

A copy of the completed application and the plan Terms and Conditions are available on request. You should be aware that your plan could be brought to an end if you fail to tell us any facts which might influence our assessment of your application. If you have any doubt as to whether a fact is relevant, then you should disclose it to us.

Once you have completed and signed the application you should send it along with all requested additional information to our New Business Team, RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Please note that the start date of your plan may be delayed if you fail to complete this application in full or provide suitable evidence where required.

Where both the Corporate Trustee and the Settlor(s) are resident in the Isle of Man, the Settlor(s) must complete an Automatic Exchange of Information - Individual Self Certification form. The form can be downloaded from www.rl360.com.

Remember, if you need any help, our Regional Support teams are on hand to guide you by telephone or by email.

All references to RL360 within this application form mean RL360 Insurance Company Limited.

All references to PIMS within this application form mean Personal Investment Management Service.

Although the trustees are the applicant, the scheme member should counter sign the declaration along with the authorisation to pay any Financial Adviser or Investment Adviser fee to acknowledge the terms of the plan and any fees payable.

01 YOUR DETAILS

If you require online servicing for your company please download our agreement and registration forms from our website – www.rl360.com. If you wish to link this plan to your existing online service please quote your online reference or existing username below.

Online reference or existing username	TC - 179400

Details of the trust

Name of the trust	The Centaurus Lite Retirement Benefit Scheme
Date trust was established (dd/mm/yyyy)	0 4 1 1 2 0 1 3
Nature and purpose of the trust	Retirement Benefit Scheme

Corporate trustee details

Corporate trustee name	Sovereign Pension Services Ltd ATO The Centaurus Lite Retirement Benefit Scheme Re:
Global Intermediary Identification Number (FATCA GIIN)	XT9MKN.00012.ME.470
Registered address and postcode (in full)	Suite 5, Valley Towers, Valley Road, Birkirkara, BKR 9022
Country	Malta
Contact name	Maria Mupimhidza
Contact position	Client Relationship Team Leader
Telephone number	00356 27 888 132
Email address	maltapensions@sovereigngroup.com

Correspondence details

Please note that any correspondence we are required to send to you will be sent to the address you provide here. If no correspondence address is supplied we will use your registered address.

Address for correspondence and postcode	Same as above

Directors or partners

You will need to provide us with a list of all directors or partners for your business, but we also need you to name two directors, one an executive director, for identity verification purposes. Please state their details here

	Executive Director/Partner 1 (must be completed)	Director/Partner 2 (must be completed)
Sex (please tick)	☐ Male ☐ Female	☐ Male ☐ Female
Title (please tick)	☐ Mr ☐ Mrs ☐ Miss	☐ Mr ☐ Mrs ☐ Miss
	Other (in full)	Other (in full)
First name(s)	Held on file	Held on file
Last name(s)		
Date of birth (dd/mm/yyyy)		
Current residential address and postcode (in full)		
Country		
Position		

01 YOUR DETAILS CONTINUED

Authorised signatories

You will need to provide us with a list of all authorised signatories, but please tell us how many signatories will need to sign in order to action changes to the plan (including any special instructions, for example – one from category 'A' and one from category 'B')

Number of signatories required 2

Special instructions

Shareholders and beneficial interest

Please tell us who in your company has a shareholding or beneficial interest of 25% or more. You will have to provide verification of identity for those listed.

First Name(s)	Last Name(s)	Position	Shareholding (%)
Held on file			

Evidence required

☐ As a corporate trustee applicant, please tick to confirm that you have supplied the following:

For the company

- A full list of all directors.
- Suitably certified certificate of incorporation.
- A copy of the latest annual report and accounts.
- Suitably certified documentation verifying registered address of the company.
- Suitably certified identity and address documentation for at least two directors, one of whom must be an Executive Director.
- A full list of authorised signatories (including board resolution for public limited companies) showing officers from whom we can take instructions and including specimen signatures.
- Suitably certified identity and address documentation for all shareholders with a beneficial interest of 25% or more.

For the trust

- Suitably certified copy of the trust deed and any subsequent deed(s) of appointment or retirement.

If not shown in the trust deed we will require details for each of the following:

	Settlor(s)	Protector(s)	Beneficiaries (where named)
First name	✓	✓	✓
Last name	✓	✓	✓
Date of birth	✓	✓	✓
Current residential address	✓	✓	✓
Occupation	✓	x	x
Date of death	✓#	x	x

for Settlor(s) no longer alive.

02 LIVES ASSURED

You may have up to 6 lives assured on your PIMS plan. At least 1 life assured must be younger than age 75 when the plan starts. Please complete the details of all lives assured below.

	Life assured 1	Life assured 2
Sex (please tick)	☐ Male ☐ Female	☐ Male ☐ Female
Title (please tick)	☐ Mr ☐ Mrs ☐ Miss	☐ Mr ☐ Mrs ☐ Miss
	Other (in full)	Other (in full)
First name(s)		
Last name(s)		
Date of birth (dd/mm/yyyy)		
Nationality		
Current residential address and postcode (in full)		
Country		

	Life assured 3	Life assured 4
Sex (please tick)	☐ Male ☐ Female	☐ Male ☐ Female
Title (please tick)	☐ Mr ☐ Mrs ☐ Miss	☐ Mr ☐ Mrs ☐ Miss
	Other (in full)	Other (in full)
First name(s)		
Last name(s)		
Date of birth (dd/mm/yyyy)		
Nationality		
Current residential address and postcode (in full)		
Country		

	Life assured 5	Life assured 6
Sex (please tick)	☐ Male ☐ Female	☐ Male ☐ Female
Title (please tick)	☐ Mr ☐ Mrs ☐ Miss	☐ Mr ☐ Mrs ☐ Miss
	Other (in full)	Other (in full)
First name(s)		
Last name(s)		
Date of birth (dd/mm/yyyy)		
Nationality		
Current residential address and postcode (in full)		
Country		

03 PLAN REQUIREMENTS

IMPORTANT: The following information MUST match the details shown on your Key Information Document.

Plan currency

Please tick only one: ☐ GBP ☐ USD ☐ EUR ☐ CHF ☐ AUD ☐ HKD ☐ JPY

Payment

Please remember the minimum payment is GBP50,000 or currency equivalent. Please refer to the Product Guide for currency equivalent minimums. Where you are transferring or exchanging assets please provide an estimated value.

Your initial payment will be applied to your plan in the currency(ies) paid to us.

Amount		(Currency and cash amount)
	+	
Asset exchange value (if any)		(Cash amount)
	+	
Asset transfer value (if any)		(Existing assets to be added directly into your plan)
	=	
Total payment		

Segments

Please state your required number of segments. The minimum number of segments is 1 and the maximum is 100. If you leave this blank we will issue your plan with 100 segments.

Number of segments: 100

IMPORTANT: some banking institutions may deduct charges for processing international payments. Please check with your bank if any charges will apply prior to transferring your payment to us. If they do, please make sure that the amount your bank transfers is enough, so that the remaining amount received is at least equal to the amount due.

Payments by cheque or telegraphic transfer

Please confirm the details of the bank that you will be making payment from.

If you want to use a Currency Exchange House to transfer your payment to us, please ensure that it has been approved by RL360 first. Please also provide your bank account details below from where the payment originates, along with a full audit trail to evidence the transfer to us.

Bank name: Barclays Bank PLC

Bank address and postcode: 1 Churchill Place, Canary Wharf, London, E14 5HP

Account holder's name: SPS ATO Centaurus Lite RBS

Branch SWIFT code (for all non-GBP and international payments) SWIFT code must be either 8 or 11 digits: B A R C G B 2 2

OR Bank sort code (for UK GBP payments only): 2 0 - 4 7 - 3 5

IBAN/account number (all non-GBP accounts): GB43BARC20473593688984

OR Account number (GBP UK Bank only): 93688984

Account held for: 3 years months

04 ASSET REQUIREMENTS

If you wish to use an investment adviser you should complete our Investment Adviser Appointment Form, returning it along with your application. If you need additional space to complete this section, please use Section 07 – Additional Information.

The payment and any asset exchange value will be used to calculate the amount linked to each of your chosen assets. Asset transfers will be added into the plan directly.

Quick selection

☐ Please allocate my payment to the PIMS cash account (we will supply a Dealing Instruction at a later date)

Your PIMS investments

Please tell us the percentages of the payment that you want to be applied to each asset.

PIMS cash account (mandatory[1])			Percentage
You must place at least 2% of your total payment into the PIMS cash account			%
Bank or building society name		**Cash deposit name**	**Percentage**
			%
ISIN or Sedol code[2]	**Asset manager**	**Asset name (including currency)**	**Percentage**
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
		Total	100%

[1] If you do not specify a percentage we will reduce your selected asset percentages proportionally to ensure that 2% is allocated to the PIMS cash account.

[2] Please be aware that asset managers may impose minimum amounts that they will allow to be sold or purchased. Any income from distributing assets will automatically be credited to your PIMS cash account.

05 SOURCE OF WEALTH DETAILS

The Insurance (Anti-Money Laundering) Regulations 2008 requires all Isle of Man life companies to make enquiries as to how an applicant has acquired the monies to be used as payment for their plan. This reflects the Isle of Man's commitment to maintain the highest possible standards of business practice and to counter money laundering and the financing of terrorism.

RL360 has adopted a risk-based approach to meet these regulations, categorising all countries that we will accept business from into 1 of 3 tiers. Each tier has different source of wealth requirements. We have categorised countries according to their level of compliance with international regulatory standards.

Full details on the source of wealth procedures can be obtained from your financial adviser or can be downloaded from www.rl360.com/sourceofwealth.pdf.

You must complete the following questions below in all cases and for both Settlors as applicable.

	Settlor 1	Settlor 2
Annual salary plus bonuses		
Income this year (include currency)		
Income last year (include currency)		
Occupation		
Employer's company name		
Nature of business		
Other unearned income		
Amount received (include currency)		
Received from		
Date received (dd/mm/yyyy)		

If you are retired please tell us your previous occupation, salary, employer and date of retirement.

Previous occupation		
Salary (include currency)		
Employer's company name		
Date retired (dd/mm/yyyy)		

Where your source of wealth for this application is from any of the following, please provide details.

Savings		
Amount received (include currency)		
Bank where savings were held		
How were savings accumulated?		

05 SOURCE OF WEALTH DETAILS CONTINUED

	Settlor 1	Settlor 2
Pension transfer		
Amount received (include currency)		
Received from		
Date received (dd/mm/yyyy)		
Property or asset sale		
Amount received (include currency)		
Address of property sold or asset type		
How long held		
Date of sale (dd/mm/yyyy)		
Company profits		
Profits this year (include currency)		
Profits last year (include currency)		
Industry		
Company sale		
Amount received (include currency)		
Company name		
Company industry		
Date received (dd/mm/yyyy)		
Other (such as a lottery or betting win, gift or inheritance. For inheritance please state from who.)		
Amount received (include currency)		
Source		
Date received (dd/mm/yyyy)		

RL360 reserves the right to request further documentary evidence of source of wealth should it be considered necessary.

06 REGULAR WITHDRAWALS

If you do not wish to set up regular withdrawals on the plan at this stage, please continue to Section 07 - Additional Information.

Please remember that the minimum regular withdrawal is GBP250 or currency equivalent. Regular withdrawals will be paid in the plan currency unless you tell us otherwise in Section 07 - Additional Information.

How do you want to take the withdrawals? (choose only one)

☐ As fixed amount — Tell us the amount

OR

☐ As a percentage — Tell us the percentage of the total initial payment %

Withdrawal frequency: ☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Yearly ☐ Termly

Date of first withdrawal (dd/mm/yyyy)

Payment method: ☐ BACS ☐ TT

BACS payments require up to three days to clear and can only be used for GBP payments to a UK bank account. A GBP20 (or currency equivalent) charge applies to payments made by TT.

If you would like withdrawals to be paid back to the same bank account as detailed in Section 03 - Plan Requirements, please tick below. Otherwise please specify the bank account to be used to receive withdrawals. Payments can only be made to bank accounts in the trust's name, as the applicant.

☐ Please use the bank account details in Section 03 - Plan Requirements

Bank name

Bank address and postcode

Account holder's name

Branch SWIFT code (for all non-GBP and international payments) SWIFT code must be either 8 or 11 digits

OR Bank sort code (for UK GBP payments only) - -

IBAN/account number (all non-GBP accounts)

OR Account number (GBP UK Bank only)

Account held for years months

07 ADDITIONAL INFORMATION

If you have no additional notes, please continue to Section 08 - Declaration.

1. Pension Scheme:	Approx Value:
2. Pension Scheme:	Approx Value:
3. Pension Scheme:	Approx Value:
4. Pension Scheme:	Approx Value:

08 DECLARATION

Plan literature
I confirm that I have read a copy of the plan literature including the Product Guide, Key Information Document and Terms and Conditions.

My application
I confirm that all of the information provided in this application, along with any supporting forms, questionnaires, statements, reports or other information is true and complete.

Availability
I confirm that to the best of my knowledge and belief, I am not subject to any legislation that would make this investment this plan unlawful.

Financial adviser
I have appointed _____ (company name) to act as my financial adviser.

I agree to RL360 Insurance Company Limited (RL360), disclosing all information relating to the plan to my appointed financial adviser. I will let RL360 know in writing if I decide to change my appointed financial adviser.

Illustration
I understand that my Illustration is not guaranteed by RL360 or my adviser, and only offers an indication of what I might get back under a limited number of scenarios. I accept that RL360 is not responsible for monitoring whether my plan's performance matches the assumptions made in my Illustration.

Key Information Document (KID)
I confirm that I have included a signed KID with this application.

I understand that the KID sets out the details of my plan, and by signing it I acknowledge that I am aware of the charges that will be deducted.

I am also aware that the details that I have provided in Section 03 – Plan Requirements must match my signed KID. If they are different RL360 will ask me to sign a new KID matching Section 03 – Plan Requirements before it can allow my plan to start.

Investment
I am aware that RL360 does not provide investment advice.

I request that RL360 allocates the payment to the assets detailed in Section 04 – Asset Requirements. In order for RL360 to do this, I confirm the following:

a) I agree to RL360 acting on dealing instructions received from me or the appointed investment adviser, and I will read the documentation issued by the asset manager for each asset prior to selecting it for the plan.

b) Where the payment is allocated in full or in part to any cash deposit account(s), I am aware that I may not be covered by any depositors compensation scheme should the deposit account provider become insolvent. I am aware that this is because RL360 holds this account on my behalf.

   I acknowledge the risks associated with linking a cash deposit account to the plan and accept that in the event of the insolvency of my chosen deposit account provider, RL360 will have no responsibility for any loss and I could lose the full amount invested.

   I am aware and acknowledge that the deposit account provider I choose to invest with may not be an institution or subsidiary with which RL360 would normally hold balances or deposits.

c) I am aware that some assets (including cash deposits) may have terms and conditions that could:

   i) restrict RL360 from realising a cash value when requested and prevent RL360 paying out benefits from the plan in a timely fashion.

   ii) result in RL360 receiving the cash value from a sale in multiple instalments. If this should happen RL360 has the right not to re-invest or pay in full, benefits from the plan until the amount has been received in full.

   iii) result in RL360 receiving a payment from a sale by a means other than cash. If this should happen RL360 may require us to cancel some or all of the plan.

   iv) result in RL360 having to pay back some or all of the sale proceeds if an adjustment has to be made after the payment. If RL360 is required to make such a repayment and the plan value is too low to cover it, or I have cancelled the plan, I agree to compensate RL360 for any loss that it has suffered as a result.

d) I accept that RL360 has the right to sell assets linked to the plan without requiring my permission. RL360 may do this if it decides that an asset may have harmful legal or tax consequences under law.

e) I am aware that there may be fees to pay when RL360 sells one or more of the assets linked to the plan. Any fees due when selling an asset should be detailed by the asset manager in the asset documentation.

f) I confirm that I am aware of the fees that must be paid in relation to the chosen assets. I realise that these fees are required to cover the costs of promoting and distributing the assets, including any commission paid to my appointed adviser(s).

I confirm that I have the necessary powers to take out this plan and enter into a contract with RL360.

I also confirm that my company has not been, and is not in the process of being, struck-off, dissolved, wound-up or terminated.

I agree that I will notify RL360 in writing immediately when any of the directors, list of authorised signatories or trustees change.

I agree that I will provide evidence of identity and current residential address when asked by RL360. I also acknowledge that RL360 can ask for an up-to-date authorised signatory list at any time.

I am aware that RL360 is authorised to obtain a bank reference at any time.

Data Protection

This form collects your personal data. We require your personal data so we can provide you with services relating to the performance of your contract. You may ask us to stop processing your data, however this may disrupt the services RL360 can provide to you or may stop us being able to assist you. To find out how long we will keep your data, please refer to our privacy policy at www.rl360.com/privacy. Any data you provide to RL360 may be shared, if allowed by law, with other companies both inside and outside of RL360 and to persons who act on your behalf. Data and information about you can be transferred outside of the Isle of Man and RL360 may be required to provide it to its regulator, its government or anyone else required by law.

RL360 will use your data and information to allow for the administration of your plan, prevent crime, prosecute criminals and for market research and statistics. RL360 will, at all times, make sure that your data and information is only used in ways that are allowed by law.

You can receive a copy of the information RL360 holds about you free of charge by writing to our Data Protection Officer at: RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles, or by emailing dpo@rl360.com. We can reserve the right to not send you your personal data in some circumstances - if we do we will write to you setting out the reasons why.

Our full privacy policy can be viewed at www.rl360.com/privacy or can be obtained by requesting a copy from our Data Protection Officer.

Politically Exposed Persons

A Politically Exposed Person (PEP) is a person entrusted with prominent public functions, their immediate family members or persons known to be close associates of such persons. Examples of PEPs include political figures, members of the judiciary, diplomatic service officers, managers and supervisors of state owned enterprises and senior ranking military officers.

Please add the names of any PEPs associated with this application in the box below.

Where this box is left blank, you are confirming that no PEPs are associated with this plan.

Legal

I agree to my plan being governed by Isle of Man law and to the Isle of Man Courts having the right to decide any case that maybe brought in relation to my plan.

Cancellation

I am aware that I have the right to cancel my plan as detailed in the Key Information Document. I understand that the amount I get back may be less than what I paid where my selected assets have fallen in value. I am aware that to cancel my plan I will need to complete the Cancellation Notice and return it to RL360.

08 DECLARATION CONTINUED

Final agreement

I agree to the following documents forming the basis of the contract between me and RL360:

- this Application Form
- the Key Information Document
- the Terms and Conditions
- the Plan Schedule
- any Endorsement to the Plan Schedule.

I accept that RL360 can bring the plan to an end if I have failed to detail any facts that may influence the decision to accept this application.

I confirm that this application was signed in (give country) Malta

	Trustee 1/Authorised Signatory	Trustee 2/Authorised Signatory
Signed		
Full name		
Date (dd/mm/yyyy)		

	Trustee 3/Authorised Signatory	Trustee 4/Authorised Signatory
Signed		
Full name		
Date (dd/mm/yyyy)		

	Acknowledged by Scheme member
Signed	
Full name	
Date (dd/mm/yyyy)	

09 FINANCIAL ADVISER DETAILS

This section is to be completed by your financial adviser.

The RL360 adviser number can be obtained from your regional office.

Company name

RL360 adviser number

Name of regulatory or authorising body

Regulatory number (if applicable)

Financial adviser's stamp (if this does not state an address, please complete company address details too)

Full name

Online services username (if registered)

Work telephone number

Mobile telephone number

Email address

I confirm that I have seen documentary proof of the applicant(s) identity, and certification of their residential address, and have, where applicable, attached suitably certified copies of both as set out in the completion notes, along with this application.

Signed

Date (dd/mm/yyyy)

10 APPLICATION CHECKLIST

This checklist will help make sure you have provided everything we need to process your application.

Verification of identity – must be provided for all directors/partners named in Section 01 – Your Details.
Please send a **suitably certified copy*** of their passport or National Identity Card showing their photograph(s) – If you are unable to provide either of these please provide a reason why and contact us to discuss other acceptable documents before sending in your application.

Applicants

☐ I have provided identification (please tick to confirm)

If you are unable to provide ID please confirm why below:

Verification of current residential address – must be provided for all applicants
Please send a **suitably certified copy*** of at least one of the following documents for each director/partner named in Section 01 - Your Details. If you are unable to provide any of the documents listed below, please provide a reason why in Section 07 – Additional Information and contact us to discuss other acceptable documents before sending in your application.

Please tick which documents you have sent us	Acceptable document
☐	Latest bank account or credit card statement
☐	Utility, rates or council tax bill (less than 3 months old). Mobile telephone bills are not acceptable
☐	Current driving licence
☐	Proof of ownership or rental at current residential address
☐	Mortgage statement
☐	Tax assessment document
☐	State pension, benefit book or other government produced document showing benefit entitlement
☐	Extract from official register of electors
☐	Proof of payment for a PO Box service (which must also show the residential address) where the PO Box shown is also the correspondence address of the applicant
☐	Entry in local telephone directory.

Confirmation of plan details
Please make sure you have completed Section 03 – Plan Requirements and have included a signed Illustration and Key Information Document.

☐ I have provided my plan requirements and can confirm that they match my Key Information Document (please tick to confirm).

☐ I have included a signed Illustration and Key Information Document (please tick to confirm).

***Suitably Certified Copy Documentation**
Your financial adviser can certify your copy documents, if they hold established Terms of Business with us and, where appropriate, have been granted Suitable Certifier status. Please consult your financial adviser to check if they can certify your documents.

10 APPLICATION CHECKLIST CONTINUED

If your financial adviser cannot certify your documents, we will accept certification by one of the following 'Suitable Certifiers':

- A Notary Public (or equivalent)
- A lawyer or advocate
- A formally appointed member of the judiciary
- An employee of RL360
- A Commissioner for Oaths
- A registrar or other civil or public servant authorised to issue or certify copy documents.

If you cannot have your documents certified by one of the above, please contact us.

The certifier must:

- Add the statement 'Certified as a true copy taken from the original'
- Sign and date the copy document on all pages
- Print their name clearly in BLOCK CAPITALS underneath their signature
- Record the capacity or position in which they are certifying the document
- Add their company name or official stamp or seal.

The documents which we receive **must** contain the original certification and stamp.

11 PAYMENT METHODS

The payment can be made using any of the following methods.

Cheque

Please send your cheque, made payable to RL360 Insurance Company Limited to RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP.

Your cheque must come from the bank account(s) you have detailed in Section 03 – Plan Requirements.

Please note that GBP cheques can take up to five working days to clear. Other currency cheques may take considerably longer to clear. If you have chosen assets with a dealing deadline, you may wish to consider a Telegraphic Transfer. These will usually provide cleared funds on the same day.

Telegraphic transfer

If you are paying into the plan by telegraphic transfer please instruct your bank to quote the trust's name as a reference.

Your payment must come from the bank account(s) you have detailed in Section 03 – Plan Requirements.

Please make your payment to RL360 Insurance Company Limited through the appropriate bank below.

Currency	Swift code	IBAN	Sort code	Account number	Bank name	Account name
AUD	CITIGB2L	GB45 CITI 1850 0813 1419 34	18-50-08	13141934	Citibank, London	RL360
CHF	CITIGB2L	GB26 CITI 1850 0813 1418 88	18-50-08	13141888	Citibank, London	RL360
EUR	CITIGB2L	GB20 CITI 1850 0813 1418 02	18-50-08	13141802	Citibank, London	RL360
GBP	CITIGB2L	GB34 CITI 1850 0813 1420 35	18-50-08	13142035	Citibank, London	RL360
HKD	CITIGB2L	GB10 CITI 1850 0813 1416 91	18-50-08	13141691	Citibank, London	RL360
JPY	CITIGB2L	GB26 CITI 1850 0813 1415 00	18-50-08	13141500	Citibank, London	RL360
USD	CITIGB2L	GB54 CITI 1850 0813 1415 78	18-50-08	13141578	Citibank, London	RL360

Bank address

The bank address for all the above accounts is: Citibank, Citigroup Centre, Canada Square, Canary Wharf, London, E14 5LB, UK.

AUTHORISATION TO PAY A FINANCIAL ADVISER FEE

Please complete in BLOCK capitals throughout.

Who is this form for?

This form is for applicants who wish to authorise RL360 to pay a financial adviser fee to:

(adviser company and address)

RL360 adviser number:

We can only accept instructions that have been signed by all applicants.

Important notes

1. As this instruction will result in a deduction from your plan to meet the fee you are agreeing to pay, you should note that this deduction may form part of any deferred tax allowance for your country of residence. You should consult your tax adviser to determine whether this could affect you.
2. RL360 cannot be held responsible for any future tax liability that may accrue to the adviser as a result of a failure to levy tax where it later transpires that it should have been charged. The adviser is responsible for deciding whether or not the service they are providing is subject to any additional taxes.
3. This fee is calculated and paid each quarter from the plan anniversary.
4. The value of any additional payments made to the original plan will be treated as part of its value when the fees are calculated.
5. This agreement shall be subject to, and interpreted in, accordance with the laws of the Isle of Man.
6. I confirm that I will inform RL360 in writing should I wish to terminate payment of this fee.

Applicant(s) to complete

I authorise RL360 to pay the following fee to my financial adviser:

Financial adviser fee

% per year, paid quarterly in arrears as percentage of my plan value (the fee should not be more than 1.5% per year).

Note: where this fee is used in conjunction with an investment adviser fee, the two fees combined cannot be more than 2.0% per year.

Plan application dated (dd/mm/yyyy)

	Trustee 1/Authorised Signatory	Trustee 2/Authorised Signatory
Signed		
Full name		
Date (dd/mm/yyyy)		

	Trustee 3/Authorised Signatory	Trustee 4/Authorised Signatory
Signed		
Full name		
Date (dd/mm/yyyy)		

	Acknowledged by Scheme member
Signed	
Full name	
Date (dd/mm/yyyy)	

INVESTMENT ADVISER APPOINTMENT

Who is this form for?
This form is for applicants who wish to appoint an investment adviser to their plan. Investment advisers may act on a non-discretionary or discretionary basis. This is your choice and an agreement that you must make with your investment adviser.

Completing this form
By completing this form you are informing RL360 about the appointment of a company to act as an investment adviser to your plan. They will have the power to place dealing instructions on your behalf.

We can only accept written instructions that have been signed by all owners, trustees or authorised signatories.

Please complete in BLOCK capitals throughout.

SECTION 1 INVESTMENT ADVISER APPOINTMENT

Applicant(s) to complete
I wish to appoint

Investment adviser company name

to act in the capacity of an investment adviser to the plan

Application dated (dd/mm/yyyy) ☐☐ ☐☐ ☐☐☐☐

I understand that my investment adviser will be able to act on my behalf, subject to the terms and conditions set out in Section 2 below, to advise on and change the assets to which the value of this plan is linked. I authorise RL360 Insurance Company Limited (RL360) to release all relevant information relating to the plan to the investment adviser when requested.

I understand that RL360 is not responsible for any loss or liability incurred to the plan as a result of advice given, or negligence by, the appointed investment adviser. I also understand that RL360 is not responsible for the performance of any assets linked to my plan.

I confirm that all communications in relation to dealing instructions should be directed to the investment adviser.

Please confirm on what basis you wish the investment adviser to be appointed, non-discretionary or discretionary, by ticking the appropriate box below.

☐ I confirm that the investment adviser will be acting on a non-discretionary basis. Dealing instructions may only be forwarded to RL360 after the investment adviser has consulted me. The investment adviser has confirmed to me that they have the necessary regulatory authorisations in order to perform this role. I understand that RL360 is not required to obtain proof that my investment adviser has consulted with me, prior to acting on any instructions received.

☐ I confirm that the investment adviser will be acting on a discretionary basis. Dealing instructions may be forwarded to RL360 without my consent. The investment adviser has confirmed to me that they have the necessary regulatory authorisations in order to perform this role.

I authorise RL360 to take a fee from the plan in line with the following:

A percentage

☐ % per year, taken quarterly as percentage of the plan value (the fee should not be more than 1.5% per year).

Note: where this fee is used in conjunction with a financial adviser fee, the two fees combined cannot be more than 2.0% per year.

SECTION 1 INVESTMENT ADVISER APPOINTMENT CONTINUED

I am aware that for as long as I have an appointed investment adviser I will be unable to access online dealing facilities.

I confirm that should I change my investment adviser, or bring this agreement to an end in the future, I agree to inform RL360 in writing (originals only), immediately.

I acknowledge that RL360 has the right to reject the appointment of my investment adviser at its discretion.

I agree that I am solely responsible for the appointment of an investment adviser to my plan and that I am also responsible for ensuring that they have the appropriate experience, and/or qualifications and permissions to provide me with investment advice.

I acknowledge that RL360 is not liable for the performance or conduct of my investment adviser, or for ensuring that they hold and continue to maintain any regulatory or legal permissions required to provide investment advice.

	Trustee 1/Authorised signatory	Trustee 2/Authorised signatory
Signed		
Full name		
Date (dd/mm/yyyy)		

	Trustee 3/Authorised signatory	Trustee 4/Authorised signatory
Signed		
Full name		
Date (dd/mm/yyyy)		

	Acknowledged by Scheme member
Signed	
Full name	
Date (dd/mm/yyyy)	

SECTION 2 INVESTMENT ADVISER DETAILS AND CONDITIONS

Investment adviser to complete

Full name	
Online services username (if registered)	
Company name	
RL360 adviser number	
Investment adviser company address	
Email address	
Telephone number	
Fax number	

SECTION 2 INVESTMENT ADVISER DETAILS AND CONDITIONS CONTINUED

If you do not have Terms of Business with RL360, please contact your Regional Sales Manager before submitting this form.

In accepting the appointment of investment adviser to the above stated plan, we agree to the following terms and conditions:

1. All instructions relating to the purchase, sale or switching of assets will be in respect of any asset agreed by RL360 as being eligible for the plan.

2. All instructions should be provided to RL360 in a format as agreed by RL360.

3. RL360 will purchase, sell or switch assets at the relevant market price as available at the time of placing an instruction.

4. RL360 has the right to accept or reject any instruction from the investment adviser at its own discretion.

5. The investment adviser must maintain such authorisation as is necessary to act as an investment adviser under the legislation and regulation in the country in which advice is given.

6. RL360 and the plan owner cannot be held responsible for any future tax liability, that may accrue to the investment adviser, as a result of a failure to levy tax where it later transpires that tax should have been charged. The investment adviser is responsible for deciding whether or not the service they are providing is subject to the levy of additional taxes.

7. RL360 has the right to remove the investment adviser from the plan, without specifying a reason, and on giving one month's written notice to the plan owner and the investment adviser.

8. The investment adviser may resign their appointment by giving written notice to the plan owner and RL360. RL360 will remove the investment adviser from the plan as soon as the notification is received.

9. This appointment will cease immediately upon written notification of bankruptcy, dissolution or insolvency of the investment adviser, or any composition with creditors, or if the investment adviser is in breach of any regulatory requirement, or it becomes illegal for the investment adviser to act in this capacity.

10. This appointment and agreement shall be subject to, and interpreted in, accordance with the laws of the Isle of Man.

11. RL360 will not be liable in the event that the appointed investment adviser or the plan owner fails to notify RL360 of any material factor affecting the above.

Please submit a current certified copy of your company's Authorised Signatory list with this form. If you have an additional list for persons authorised to sign dealing instructions, please also submit a certified copy with this form.

If your company is not regulated in the UK, Isle of Man, Channel Islands, Hong Kong or Gibraltar, please provide identification and address verification for each person on the Authorised Signatory list.

Investment adviser

Signed

Date (dd/mm/yyyy)

RL360 Insurance Company Limited

T +44 (0)1624 681681
E csc@rl360.com

Registered Office: International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles. Registered in the Isle of Man number 053002C. RL360 Insurance Company Limited is authorised by the Isle of Man Financial Services Authority.

PML06a 07/19

HELPING YOU TO PROTECT AND GROW YOUR WEALTH

SCHEME MEMBER ACCESS FORM

Who is this form for?
This form should be used exclusively by corporate pension plan owners who would like to provide their clients with online access to information about the offshore plan held within their pension arrangement.

Acceptable pension schemes include, but are not necessarily limited to Qualifying Recognised Overseas Pension Schemes (QROPS) and Self Invested Personal Pensions (SIPPs).

Completing this form
If you need help completing this form please contact our Customer Services Team on +44 (0)1624 681685 or alternatively you can email websupport@rl360.com.

When you have completed this form
Please send the original signed agreement by post direct to: Web Support Team, RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Corporate pension details

Online reference number

Company name

Pension scheme name

Plan number

Member details

Title (please tick) ☐ Mr ☐ Mrs ☐ Miss Other (in full)

First name(s)

Last name(s)

Date of birth (dd/mm/yyyy)

Email address

Password
(this will only be used once)

Password reminder

Current residential address
(including postcode and country)

Member signature
(This is optional and dependent on the requirements of the corporate pension provider)

RL360

Corporate pension authorised signatory

	Authorised Signatory 1	Authorised Signatory 2
Signed		
Full name		
Position held		
Date (dd/mm/yyyy)		

RL360 Insurance Company Limited. Registered Office: International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles. Registered in the Isle of Man number 053002C. RL360 Insurance Company Limited is authorised by the Isle of Man Financial Services Authority.

RL360