

STARTING YOUR MANAGED CAPITAL ACCOUNT

Intermediary Account number								
Account number allocated								
Introducing Intermedia	у							
Contact								
Company name								
Address								
Telephone number								
Fax number								
E-mail address								
Old Mutual Internation advisers.Your financia responsible for the sui	l adviser,	not Ol	d Mut	ual Interi	natio	nal, i	s	ncial

This application form should be read in conjunction with the product brochure for the **Old Mutual International Managed Capital Account**. When completing this application, please use BLOCK CAPITALS and blue or black ink only and complete all relevant sections.

Please do not use correction fluid; any amendments should be crossed out and initialled. Any incomplete information will need to be confirmed in writing by the Accountholder once Old Mutual International has received the application. Correspondence in respect of your account, including policy documentation, will normally be sent via your financial adviser. This application consists of 12 pages.

If you attach separate documentation to this form, please tick this box and ensure that additional pages are dated and signed by all the signatories. (1)

A ACCOUNT CURRENCY

Payment currency (🗸) 🛛 £ 🔅 US\$

The Account must be denominated in the same currency as your chosen funds. Contributions must also be paid in this currency.

()€

B DETAILS OF	F TH	-1E /	400	: 01	JN	TH	OLC	DER	(S)												
Please indicate which type of investor you are: (~)	\langle) Pe	rson	al inv.	vesto	or			\bigcirc	Truste	e inve	stor		() C	orpor	ate in	ivestoi	r		
Corporate Investor (Name of Corporate Investor)	e of investor you e: (<) Personal investor prorate Investor ame of Corporate																				
Trust title																					

Notes

1. If you are applying as a first-named trustee, please state name of trust.

- 2. Other trustees should provide their details on a separate sheet.
- 3. All trustees must sign the declaration.

B DETAILS O	F THE ACCO	DUNTHOLD		ED)		
ADDITIONAL CONT	RIBUTION					
Title (✓)	◯ Mr	◯ Mrs	Other			
Full forename(s)						
Surname						
Nationality						
Residential address						
	Country					
Telephone number						
E-mail						
Date of birth	DDM	MYY	YY	Sex (√)	🔾 Male	C Female
Occupation (Please include previous occupation if retired)					Yearly income US\$	
Business Sector						
						of residence) you can provide a of sending correspondence to this

Old Mutual International must be notified if your residential address changes.

Correspondence address													
	Ca	ountry										1	

SECOND ACCOUNTHOLDER (IF APPLICABLE)

Title (✓)	Mr	Mrs	Other			
Full forename(s)						
Surname						
Nationality						
Residential address						
	Country					
Telephone number						
E-mail						
Date of birth	DDM	M Y Y	YY	Sex (✔)	O Male	◯ Female

B DETAILS OF	THE ACCOUNTH	IOLDER (CONTINUE	D)						
Occupation (Please include previous occupation if retired)					Υe	arly income	US\$			
Business Sector										
	nd correspondence to you below. However, Old Mu									
Old Mutual International	must be notified if your r	residential ad	dress change	es.						
Correspondence address										
	Country									
C CONTRIBUT	IONS (PLEASE ENTE		S BELOW)							
Lump-sum contribution										
	(Minimum US\$15,000/	£10,000/E	15,000)							
Regular contribution	Monthly			Quarter	ly					
	(Minimum US\$450/£3	00/E450)		(Minimum	US\$1,	350/£900	/E1,35C))		

You may use any one of the following methods to pay contributions to your Managed Capital Account.

If you wish to make your first contribution and subsequent contribution(s) using different methods, please complete both relevant sections. Please tick the payment option(s) which you have chosen (\checkmark)

	Monthly	Contributions	Quarterly C	ontributions	Lump-sum Contributions
	First	Subsequent	First	Subsequent	Commodia
Telegraphic Transfer					
Credit card*					
Cheque/Banker's draft					

* maximum to be collected by credit card is US\$5,000/£3,500/€5,000 per transaction.

Where this amount is to be applied as an additional contribution to an existing Account, please quote the Account Number in the box below. Please note the minimum additional contribution is US $1,500/\pounds1,000/\pounds1,500$ for lump sum and US $150/\pounds100/\pounds150$ and US $450/\pounds300/\pounds450$ for monthly and quarterly increments respectively.

M	C	А										

Please note that no new contracts will be issued.

D INVESTMENT CHOICE

You can h	ave a minimum of 1% in any fund (v	vhole numbers only) and up to 10 funds in total.	_	
Fund ID	Fund manager	Fund name	Lump sum whole %	Regular whole %
Please sh	low the amount for each fund as a w	hole PERCENTAGE of the total:	100 %	100 %

In the absence of complete investment instructions, or if a selected fund is not currently available, Old Mutual International will make every effort to obtain valid investment instructions, failing which Old Mutual International will allocate part or all of the contribution to a deposit-based fund.

E AUTOMATIC WITHDRAWAL OPTION

Not available when only regular contributions are being paid into the Account.

Any automatic withdrawal payments will be in the currency in which the Account is denominated.

Annual amount required (Minimum annual amount: US\$900 or £600 or €900)

If you are amending an existing level of income, please show the revised total level required.

Frequency of withdrawals	(⁄)		\bigcirc	Мо	nthly	(\bigcirc	Quai	rterly	\bigcirc	Half-yearly	\bigcirc	Yearly
Date of first withdrawal	D	D	м	м	Y	Y	Y	Y					

The first withdrawal must be made at least one month after the Account Start Date. If no date is specified, the regular payment date will be fixed by reference to the Account Start Date.

Payee details

To be completed if cheques are to be posted direct to your bank.

Account name									
Bank name									
Bank address									
	Country								
Account number									
Sort code (where applicable)									

F DECLARATION AND APPLICATION

THIS SECTION MUST BE COMPLETED

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Managed Capital Account. 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 Old Mutual International can assess its possible significance. If you become aware of such a fact while Old Mutual International is considering your application, you should notify Old Mutual International immediately.

DECLARATION - BY THE ACCOUNTHOLDER(S)

In applying for a Managed Capital Account I declare and guarantee that:

- I understand and agree that the contract that I am applying to enter with Old Mutual International Isle of Man Limited ('Old Mutual International')
 will be subject to the laws of the Isle of Man ('Manx Law') and the exclusive jurisdiction of the courts of the Isle of Man. I understand that the
 Account Terms and Conditions will be in the English language.
- (a) The amount shown in Section C shall be invested as an initial investment and/or regular contributions for a Managed Capital Account and request Old Mutual International to issue the contract in my name, jointly with other applicant(s), if any; or
 (b) The amount shown in Section C shall be invested as an additional contribution for the contract surroutly in force begins the Account number of the contract surroutly in the contract surroutl

(b) The amount shown in Section C shall be invested as an additional contribution for the contract currently in force bearing the Account number as shown in Section C.

- 3. To the best of my knowledge and belief, the statements made in this form and any related documents are true and complete and I have not concealed any material fact.
- 4. I am not a resident of the Isle of Man or UK.
- 5. I will not be a resident of the Isle of Man or UK in the future.
- 6. All the relevant information enabling me to make an informed decision to invest in a Managed Capital Account has been provided by Old Mutual International and I have read and understood the information.
- 7. I am aware that the Managed Capital Account is designed for medium- to long-term investment, that unit prices can go down as well as up and that charges may apply if an encashment is made within five years of the latest Account contribution.
- 8. I have, together with my chosen financial adviser, evaluated the risks involved in investing in a Managed Capital Account and have made an informed decision to invest. My financial adviser, not Old Mutual International, is responsible for the suitability of the product and the advice given.
- 9. My application for a Managed Capital Account is based entirely on my own initiative, as a result of my private enquiries through direct and personal communication and was not presented to me by way of a public offering.
- 10. To the best of my knowledge and belief the execution, delivery and performance by me of this application (and any related documents) does not contravene, or constitute a violation of, any law or regulation (including without limitation, laws and regulations governing public offerings of securities and participation in investment funds) governing insurance business or of any agreement, judgement, injunction order, decree or other instrument binding upon me.
- 11. The contribution accompanying this application (if applicable) has been provided by my personal financial resources.
- 12. If I become resident in the United States of America, Old Mutual International may not be able to accept any further contributions until after I cease to be resident in the United States of America.
- 13. I have read and understand the content of this document, which comprises 10 pages.

F DECLARATION AND APPLICATION (CONTINUED)

PERSONAL DATA STATEMENT - CONSENT BY THE ACCOUNTHOLDERS

To: Old Mutual International Isle of Man Limited

- 1. I agree that you may use my personal data including any sensitive personal data ('my data') to process my application and to service my Account ('my account').
- 2. I understand and agree that:

(a) you may provide my data, by electronic or other means, to:

other companies within the Old Mutual Wealth and Old Mutual groups of companies if you regard this as necessary to service my account;
 my Adviser and Fund Adviser;

- a third party to verify my identity in line with money laundering or other legal requirements. This may involve carrying out checks with credit reference databases:

- third parties who perform tasks for you to help you service my account, including the payment and reporting of any tax or levy. These third parties may be based in countries outside the EEA. I understand that these countries may not have laws to protect my data equivalent to those of the Isle of Man. However, I understand that you will ensure that any such third parties agree to treat my data with the same level of protection as if you were dealing with it.

(b) to prevent and detect fraud you may:

- share my data with other organisations, including the police;

- check and/or file my data with fraud prevention agencies and databases, and if I give you false or inaccurate information and you suspect fraud, you will record this.

(c) you and other companies within the Old Mutual Wealth and Old Mutual groups of companies may use my data for assessment and statistical analysis purposes.

(d) my data may be made available to third parties where required by law, court order or regulation.

(e) on payment of a small fee, I am entitled to receive a copy of my data, subject to data protection law.

(f) I also have the right to require you to correct any inaccuracies in my data. In such circumstances I can contact you at Old Mutual International, Head Office, PO Box 159, King Edward Bay House, King Edward Road, Onchan, Isle of Man IM99 1NU.

Signature(s) are required by all applicants

Signature of first or sole Accountholder							Date	D	D	N M	Y	Y	YY	,
Signed in (Country)														
Signature of joint Accountholder (if any)							Date	D	D	M M	Y	Y	YY	,
Signed in (Country)														

If there are two Accountholders, the Account will be owned by them jointly. On the death of one of them, ownership of the whole Account will automatically vest in the survivor.

Additional Trustee Declaration

I/We confirm that investment into a Managed Capital Account is within the investment powers available to the Trustee(s) under the Trust, and the ultimate beneficial owner is not / will not be a resident of the Isle of Man.

Additional Corporate Declaration

I/We confirm that investment into a Managed Capital Account is within the investment powers available to the director(s) under the constitutional documentation of the company.

Trustees', Corporate Accountholders' or Assignees' signatures

	Date	D D M M Y Y Y Y
	Date	D D M M Y Y Y Y
	Date	D D M M Y Y Y Y
	Date	D D M M Y Y Y Y
Signed in (Country)		

A copy of this completed application is available on request.

G PAYMENT INSTRUCTIONS

Old Mutual International cannot accept contribution payments in cash. Under no circumstances should you send cash directly to Old Mutual International or give cash to your financial adviser.

You may use any one of the following methods to pay contributions to your Managed Capital Account. Please do not detach these payment instructions from the main body of this application.

CREDIT CARD PAYMENT AUTHORITY

Please read the following carefully and complete all sections.

Account number (to be completed by Old Mutual International or your financial adviser)

I hereby authorise Old Mutual International to collect the US\$/£/€* payment, plus an additional 1% service charge on US\$/£ contributions, from my Access/Delta/Eurocard/MasterCard/Visa* account. (*Please delete as applicable.)

Initial contribution amount																					
Initial collection date (if blank, initial collection will be undertaken on receipt of application)	DD	M	M	Y	Y	Y	Y														
Please tick as appropriate	(~)	Lun	np-sur	m con	tributi	ion		O Initial regular contribution only O All regular contrib									ributio	ons			
Name of Accountholder																					
Full forename(s)																					
Surname																					
Name of cardholder																					
Address of cardholder																					
	Cour	ntry																			
If the address on this authority differs to that on the application form please provide an explanation.																					
Frequency (✓)	O Mor	nthly			\bigcirc	Quar	terly														
Regular collection date (✓)	🔵 1st				\bigcirc	7th			\bigcirc	15th				\bigcirc	25th						
Card number																					
Expiry date (mm/yyyy)																					
Card issuer (e.g. bank name)																					
Country of issue																					
Signature of cardholder													Da	e	D	D	M N	N Y	Y Y	Y	Y

Notes:

- 1. Please check with your credit card issuer that your credit card is authorised for international transactions.
- 2. Old Mutual International reserves the right to vary the service charge at any time. Should the service charge be increased, prior notification will be given to the cardholder.
- 3. Payment by credit card is not permitted where the credit card ONLY has an ELECTRON symbol visible or is American Express.
- 4. This authorises Old Mutual International to take up to a maximum of three months' outstanding premiums from the above credit card details on the Accountholder(s) chosen collection date.
- 5. Maximum initial and monthly contribution amount to be collected by credit card is US\$5,000, £3,500 or €5,000 per contribution.
- 6. The collection date will be on the date specified above or on the following day if it is a non-working day. A default date will automatically be chosen by Old Mutual International if no date is specified.
- 7. On your credit card statement the text for your contribution payment will read OMI.

GP	PAYMENT INSTRUCTIONS (CONTINUED)																					
CHEQU	IE/BANKER'S D	ORAF	т																			
l/we																						
	cheque/banker's as applicable)	draft*	mad	le payo	ıble to	Old 1	Nutuc	ıl Inter	natio	nal fo	r US\$	/£/€'	•									
	as applicable															(a	moun	it of p	bayme	nt)		
Please ser	nd cheques attach	ned to	this o	applice	ition.																	

H STANDING ORDER/TELEGRAPHIC TRANSFER

TELEGRAPHIC TRANSFER

It is essential that the remitting bank sends to the National Westminster Bank, London, a tested Telex or SWIFT payment order (NWBKGB2L) giving full details of the Account to be credited.

To: The Manager																									
Name of your bank																									
Address of your bank																									
	Country																								
Account number																									
Account name																									
he sum of											US\$/ regule	′£/€* ar coi	(amo ntribu	ount of ution) (*	lum * dele	o-sum ete wł	cont inere c	ibutio pprop	n plus riate)	anyi	initial				
on the D D M M Y Y Y Y											•														
followed by	lowed by												US\$/£/€* (amount of subsequent payments, if applicable) (*delete where appropriate)												
on the same day Please quote this Account (to be completed by Old A adviser)	number						n wri	ting:	cial																
Please charge the amount	of the p	ayme	nt, tog	gether	with	any b	ank c	ınd a	gent	bank	's chai	rges,	to my	/our c	αςςοι	unt.									
Account name																									
Bank name																									
Bank address																									
														ĺ											
	Cou	untry																							
Signature(s)														Date		D	D	M	n I	r 1	r Y	Y			
														Date		D	D	M 1	n I	r 1	r Y	Y			
Signature(s)														Date		D	D	M	r M	r 1	r Y	Y			

Date

D D M M Y Y Y

Y

I BANK DETAILS

SWIFT PAYMENTS

Please select the bank details according to the currency selected

Sterling payments

Payments should be made to Isle of Man Bank, East Region. For the credit of: Old Mutual International Isle of Man Limited.

US dollar/Euro payments

Payments should be made to National Westminster Bank, London. For the credit of: Old Mutual International Isle of Man Limited.

	Sterling payments	US dollar/Euro payments
Swift code	RBOSIMD2XXX	NWBKGB2LXXX
Bank	Isle of Man Bank, East Region 2 Athol Street, Douglas, Isle of Man	National Westminster Bank, London
Sort code	55-91-00	
Beneficiary	Old Mutual International Isle of Man Limited	Old Mutual International Isle of Man Limited
Number IBAN	GB89 NWBK 559100 10934022	US dollars GB69 NWBK 607301 67505139 Euro GB11 NWBK 607202 57005028

Sterling payments from UK banks (CHAPS/BACS payments)

Sort code	55-91-00
Bank	Isle of Man Bank, East Region, 2 Athol Street, Douglas, Isle of Man
Beneficiary	Old Mutual International Isle of Man Limited
Number IBAN	GB89 NWBK 559100 10934022

Banker's draft / Cheque payments

If payment is to be made by banker's draft/cheque, these should be sent with this form.

J NOMINATION OF BENEFICIARIES

You may nominate one or more persons ('the Beneficiaries') to whom ownership of your Account will transfer on your death.

1. Definitions

Definitions	
'Old Mutual International'	means Old Mutual International Isle of Man Limited.
'the Account'	means the Managed Capital Account to be issued by Old Mutual International with regard to this Application.
'the Accountholder/I/Me/My'	means the person(s) shown in Section A of this Application.
'Transfer Date'	means the date of death of the Accountholder (death of the second to die where there are two
	Accountholders).

The singular includes the plural and vice versa, unless the context indicates otherwise.

2. The Beneficiaries

Listed below are the individuals who will be entitled to the Account on the Transfer Date.

Full name	Share %	Date of Birth (dd/mm/yyyy)	Relationship to the Accountholder(s)	Current address
	100%			

J NOMINATION OF BENEFICIARIES (CONTINUED)

3. Nomination by each Accountholder

I request that the following provisions shall apply to the Account on the Transfer Date.

(a) On the Transfer Date all rights to the Account and any sum payable under the Account will accrue to the Beneficiaries named above in the shares specified.

- (b) This nomination will only have effect on the death of the Accountholder or the death of the second to die where there are two Accountholders.
- (c) The share of any Beneficiary who dies before the Transfer Date shall be divided equally between the surviving Beneficiaries.(d) This nomination shall automatically become null and void if all the Beneficiaries die before the Transfer Date.

4. Revocation and new nominations

(a) Any revocation of this nomination and any new nomination must be made in writing by:

- (i) the Accountholder where there is one; or
- (ii) both Accountholders jointly where there are two; and
- (iii) by the surviving Accountholder following the death of the first to die.

(b) Any revocation of this nomination will only apply to the Account if it is received by Old Mutual International at its Head Office before the Transfer Date.

(c) Any new nomination received by and acceptable to Old Mutual International will automatically revoke this nomination.

5. Declaration by each Accountholder

I declare that:

1. I acknowledge and understand the recommendation of Old Mutual International that I take independent legal advice to ensure that this nomination satisfies my requirements.

2. Old Mutual International will not be under any obligation to determine whether the law governing the distribution of assets belonging to me at death, restricts or prohibits a nomination.

Signature of first or sole Accountholder				 			Date	D	D	M	Μ	Y	Y	Y	Y
Signature of joint Accountholder (if any)							Date	D	D	M	Μ	Y	Y	Y	Y
Signed in (Country)															

www.oldmutualinternational.com

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

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

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

Phone: +44 (0)1624 655 555 Fax: +44 (0)1624 611 715.

Authorised and regulated by the Isle of Man Insurance and Pensions Authority.

Old Mutual International Isle of Man Limited is a member of the Association of International Life Offices.

Old Mutual International is registered in the Isle of Man as a business name of Old Mutual International Isle of Man Limited.

When printed by Old Mutual this item is produced on a mixed grade material, which uses a combination of recycled wood or paper fibre from controlled sources and virgin fibre sourced from well-managed, sustainable forests.

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