

# STARTING YOUR

# OLD MUTUAL INTERNATIONAL INTERNATIONAL PORTFOLIO BOND PRIIPS

For QROPS/QNUPS/SIPP trustees

Applicant 1					
Financial advis	ser de	tails			
Old Mutual International account number					
Name of financial adviser					
Company name					
Address					
Telephone number					
Fax number					
E-mail address					

February 2018

**This document was last updated in February 2018.** Please confirm with your financial adviser that this is the most up-to-date document for your product or servicing needs

We only sell our products through financial advisers as we believe it is important you receive independent financial advice. As it is you who chooses your financial adviser, you need to bear in mind that they are acting on your behalf and not on behalf of Old Mutual International. You are responsible for their actions or omissions.

All references to Old Mutual International in this application form mean Old Mutual International Isle of Man Limited.

#### **TAXATION INFORMATION**

Under Automatic Exchange of Information (AEOI) regulations Old Mutual International is required to obtain information about an applicant's tax status. To enable us to comply with these regulations, when submitting this application form you must also submit the 'Taxation information and self-certification – for entity investors' for trustee investments. Completion and submission of a self-certification is mandatory and failure to provide one could result in your Portfolio being reported under AEOI by default. If any of the information contained in the self-certification changes please advise Old Mutual International promptly so we can determine if a new self-certification is required.

#### **IMPORTANT INFORMATION FOR YOU - THE APPLICANT**

This application form is for trustee applicants only. Your application can be submitted online via Wealth Interactive. If you choose this option your application can be submitted to us immediately without the delay that can be experienced through the postal system. If you are an individual or corporate applicant you should use the alternative application form which is available from your financial adviser. Please note this application form must not be used by trustee applicants resident in Hong Kong, Singapore or the United States of America or its territories.

If either the settlor or beneficiaries of the trust are residents of the United States of America or any of its territories please speak to your financial adviser to confirm the acceptability of this application by Old Mutual International.

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

- Key features of your International Portfolio Bond Life PRIIPs or International Portfolio Bond Redemption PRIIPs
- Details of your Old Mutual International International Portfolio Bond Redemption PRIIPs (IPBRv3) or Details of your Old Mutual International –
  International Portfolio Bond Life PRIIPs (ref IPBv3) Policy Terms
- Unlocking the secrets of intelligent investing product brochure
- Explaining your Portfolio Bond fees and charges
- The International Portfolio Bond Redemption PRIIPs at a glance or The International Portfolio Bond Life PRIIPs at a glance
- Key Information Document (KID) for the International Portfolio Bond Redemption PRIIPs or Key Information Document (KID) for the International
  Portfolio Bond Life PRIIPs and asset Key Information Document(s) (KIDs) and, where appropriate, the asset Key Investor Information Document(s)
  (KIIDs).

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

A copy of the complete QROPS/QNUPS/SIPP application form needs to accompany this form.

If you would prefer to receive communications from us by post rather than online, please tick here (1)

For ease of reference we have used an arrow ▶ to highlight certain facts.

#### ONLINE SERVICE ACCOUNT ON WEALTH INTERACTIVE

PLEASE ENSURE THAT THE TRUST DEED PROVISIONS ALLOW DELEGATION OF TRUSTEES' POWERS TO ONE TRUSTEE ONLY, AND THE ARTICLES OF ASSOCIATION PERMITS THE COMPANY TO DELEGATE APPROVAL ON BEHALF OF THE COMPANY TO ONE AUTHORISED SIGNATORY OR THERE HAS BEEN A BOARD RESOLUTION THAT CONFIRMS THAT ONE AUTHORISED SIGNATORY HAS AUTHORITY TO ACT ON BEHALF OF THE CORPORATE TRUSTEE SOLELY, LATER REFERRED TO AS THE LEAD POLICYHOLDER. IF IT DOES NOT THEN YOU MUST OPT TO TRANSACT WITH US AND RECEIVE COMMUNICATION BY POST RATHER THAN ONLINE.

When you apply for your Old Mutual International – International Portfolio Bond PRIIPs, we will automatically set you up with an Online Service Account on our Wealth Interactive service. You will receive an e-mail from us containing a link that lets you activate this service. Once your policy and your Online Service Account are live, you can sign in to Wealth Interactive whenever you want to review your policy and carry out key transactions. You can also find all the information you need about your investment with us in one place. When we need to send you communications, such as policy valuations for example, we will generally do this through your Online Service Account, although there will be times when we still need to correspond with you by post.

#### **CANCELLATION RIGHTS**

You have the right to change your mind and cancel your application by giving written notice or through the Online Service Account. Such notice must be sent by you direct to and received by Old Mutual International within 30 days from the date your Schedule can be downloaded from your Online Service Account or received in the post by you. If you decide to cancel, we will give you your money back. However, if the value of your investment has fallen in the meantime, you may not get back the full amount you paid in. Any Old Mutual International charges will be refunded in full. If, at your request, we have facilitated a fee for advice given to you by your financial adviser and you decide to cancel your contract we cannot reclaim or refund the fee. The fee agreement is between you and your financial adviser, not Old Mutual International, and it is up to you to reclaim the fee.

# **COMPLETING THE FORM**

To complete this form:

- use CAPITAL LETTERS only
- use blue or black ink
- specify choices as appropriate
- complete all relevant sections
- do not use correction fluid; any amendments should be crossed out and initialled by all trustee applicants (authorised signatories of the corporate trustee, if applicable).

Please note that we must receive your application form by post or courier. We are unable to accept faxed or e-mailed versions and the applications received in this way will not be processed. Please ensure that you complete all relevant sections. We will contact you regarding any missing information which will need to be provided to us in writing, and this may delay your application.

A TYPE OF AP	PLICATION
TYPE OF BOND	
	e of <b>bond</b> you are applying for: (/)  CANNOT BE CHANGED AFTER IT HAS BEEN SET UP.  This is called the International Portfolio Bond – Life PRIIPs.  This is called the International Portfolio Bond – Redemption PRIIPs.
B DETAILS OF	THE TRUST
In this section, please give Will Trust') and the date t	e the following details: the name of the trust (for example, 'the Mary Jones Policy Trust dated 1 April 1990', 'the John Brown he trust was created on.
Jurisdiction of trustees	
The trust name is:	
The trust was created on:	D D M M Y Y Y Y
Trust details:  ▶Please explain the reason for the establishment of the trust, what type of trust it is and detail the source/origin of the trust assets.	QROPS/QNUPS/SIPP provider – pension transfers to the QROPS/QNUPS/SIPP (being the evidence of origin of the assets supplied by the QROPS/QNUPS/SIPP Trustee).
C DETAILS OF	THE TRUSTEE APPLICANT
DETAILS OF CORPOR	ATE TRUSTEE APPLICANT
In this section, please give	e details of the corporate trustee applicant.
Corporate trustee name	
Contact person	
Country of registration	
Registered office address (This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses.)	
boxes and care or addresses.	Postcode
Correspondence address	
	Postcode
Telephone number including area code	
E-mail address	
Corporate website address	

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AUTHORISED SIGN				
AUTHORISED SIGN	ATORIES			
Please confirm the minir	num number of	authorised signatories of the corporate tr	ustee needed to give ins	tructions
		FOR THE CORPORATE TRUSTEE MUS E NEEDED TO EVIDENCE YOUR IDE		IGN THE DECLARATION IN SECTIO
LEAD POLICYHOLD	ER (MUST BE	APPOINTED FOR AN ONLINE SER	VICE ACCOUNT)	
	ate authority to a	leed trust law and for corporate trustees, if access and transact online on behalf of the ment.		
The trustees/the compar policies comprising our The declaration on page The specific e-mail addr	ny, appoint (inse International Po es 12 and 13 se ess which will b		·	to act as the Lead Policyholder for the
FURTHER DETAILS	·	·		
Politically exposed If the applicant, or any (PEP), or connected with	other party coni	nected to this application either now or in provide details.	the past/future, could k	pe classed as a politically exposed perso
Reason for investm	ent			
For example, inheritanc				
_				
D DETAILS OF				
This section should Life PRIIPs, in sectio		pleted if you have selected the life		
	LIFE ASSUR		assurance option,	ie the International Portfolio Bo
		ED	•	ie the International Portfolio Bo
Γitle (✔)	Mr	ED Mrs Miss	•	
īitle (✓)			SECOND LIF	FE ASSURED (IF ANY)
	○ Mr		SECOND LIF	FE ASSURED (IF ANY)
Full forename(s)	○ Mr		SECOND LIF	FE ASSURED (IF ANY)
Full forename(s) Gurname	○ Mr		SECOND LIF	FE ASSURED (IF ANY)
Full forename(s) Surname Sex (✓)	Mr Other	Mrs Miss  Female	SECOND LIFE  Mr Other	FE ASSURED (IF ANY)  Mrs  Miss  Female
Full forename(s) Surname Sex (~) Date of birth	Mr Other  Male	Mrs Miss  Female	SECOND LIF	FE ASSURED (IF ANY)  Mrs  Miss  Female
Full forename(s)  Surname  Sex ( / )  Date of birth  Nationality  Dual nationality	Mr Other  Male	Mrs Miss  Female	SECOND LIF	FE ASSURED (IF ANY)  Mrs  Miss  Female
Full forename(s)  Surname  Sex ( / )  Date of birth  Nationality  Dual nationality (if applicable)  Residential address (Please note we do not accept	Mr Other  Male	Mrs Miss  Female	SECOND LIF	FE ASSURED (IF ANY)  Mrs  Miss  Female
Full forename(s)  Surname  Sex ( / )  Date of birth  Nationality  Dual nationality (if applicable)  Residential address (Please note we do not accept	Mr Other  Male	Mrs Miss  Female	SECOND LIF	FE ASSURED (IF ANY)  Mrs  Miss  Female
Full forename(s)  Surname  Sex ( / )  Date of birth  Nationality  Dual nationality  (if applicable)  Residential address  (Please note we do not accept	Mr Other  Male	Mrs Miss  Female	SECOND LIF	Fe ASSURED (IF ANY)  Mrs  Miss  Female
Title (/)  Full forename(s)  Surname  Sex (/)  Date of birth  Nationality  Dual nationality (if applicable)  Residential address (Please note we do not accept c/o and PO Box addresses)	Mr Other  Male	Mrs Miss  Female	SECOND LIF	FE ASSURED (IF ANY)  Mrs  Miss  Female

E OLD MUTU	AL INTERNATION	AL CHARGES A	AND ADV	ISER FEES				
OLD MUTUAL INTER	NATIONAL'S CHARGE	:S						
	the Old Mutual Internation		nat your financ	ial adviser has				
	n reference; only the appro ect package being applied		ernational cha	rging code should	d be used. Fai	lure to prov	ide the	right coc
ADVISER FEES								
	of the fees to be facilitated l Mutual International is no							k the 'No
nitial fee								
Monetary amount	or	% of init	tial premium	No initial fee	payable			
wish the initial fee to be in the following currency		US\$ €		Othe	er (state currency)			
Please note: to pay a fee	in a chosen currency, we	must receive a premit	ım payment in	that currency tha	ıt at least matc	hes the am	ount of	the fee.
Do you want us to pay t		estment in your Portfoli efore the remainder is				your lump	sum pre	mium
	surrender)	ment in your Portfolio of this amount from y						drawal (p
Ongoing service fee								
Monetary amount		each year or	%	of the value of t	he Portfolio Bo	nd each ye	ar	
No ongoing service	fee payable							
selecting your optio		s. We suggest the	at you discu	ss the above	with your fi	nancial d	ıdviser	before
F INVESTMEN	II DEIAILS							
PREMIUM PAYMENT								
Currency (✓)	3 🔾	OUS\$	(	€	Other (state curr	ency)		
Amount to be invested								
Payment method (✓)	Electronic	bank transfer	Share s	ale (UK only)				
Are you remitting your pr via an authorised custodio	emium to Old Mutual Interna an? (🗸)	ational or is the premiur	m to be paid by	v cash/asset transf	CI ( )	Mutual rnational	( )	ıthorised stodian
► The minimum init the International glance' document	ment must come fron ial investment amoun Portfolio Bond – Life F s). Please remember nancial adviser can p	t is £25,000 (US\$ PRIIPs 'at a glance to enclose a copy	37,500, €3 e' or Interna of receipt o	7,500 and oth itional Portfoli of your electro	er currency o Bond – Re nic bank tre	amount edemptio ansfer po	s as lis on PRIII ayment	Ps 'at a
POLICY CURRENCY								
I/We wish my/our polic	to be valued in (1)	<b>2</b>	US\$	<b>○</b> €	Other (state cur	rency)		
Please note if no cu CHANGED AFTER TH	rency is entered your E POLICY IS SET UP.	policy currency w	ill be pound	l sterling (£). T	HE POLICY (	CURRENC	Y CAN	NOT BE
Number of policies								
Please enter the number	of policies you would like.							

THE NUMBER OF POLICIES CANNOT BE CHANGED AFTER THE PORTFOLIO BOND IS SET UP.

▶ If you do not specify the number of policies we will issue 12.

#### **G** SOURCE OF FUNDING AND ORIGIN OF WEALTH

#### THIS SECTION MUST BE COMPLETED IN ALL INSTANCES. THIS SECTION CONTINUES ON THE FOLLOWING TWO PAGES.

#### **SOURCE OF FUNDS**

Currency of the bank account payment being

Additional information that may be required by the bank

How long has the trust held this account?

made from

this application form a	tiple payments, please photocopy this page, attach the details and state the reason why multiple payments are being made with and tick here (1)
Bank account holder (name as stated on trust bank account)	
Bank account number/ IBAN	
Sort code (if applicable)	SWIFT or BIC code (if applicable)
ABA number	Branch code for non-UK banks
Bank name	
Bank address	Postcode
Country	

• Accounts within the UK, Jersey, Guernsey, Isle of Man or Gibraltar require a bank account number and sort code.

years

• Premium payments made from banks outside the UK require a SWIFT or Bank Identifier Code (BIC), and an International bank account number (IBAN).

months

continued

# SOURCE OF FUNDING AND ORIGIN OF WEALTH (CONTINUED)

# **FULL DETAILS OF ORIGIN OF WEALTH**

Please tick the description option(s) relating to the original source of the premium for your bond. You must fully complete each relevant section relating to the description option(s) you have ticked.

<b>(√)</b>	Description	Details required	Your details
$\bigcirc$	Transfer of pension	Pension name	
		Pension Account number	
		Pension value	Currency:
			Amount:
		Transfer date	D D M M Y Y Y Y
$\bigcirc$	Transfer of pension	Pension name	
		Pension Account number	
		Pension value	Currency:
			Amount:
		Transfer date	D D M M Y Y Y Y
$\bigcirc$	Transfer of pension	Pension name	
		Pension Account number	
		Pension value	Currency:
			Amount:
		Transfer date	D   D   M   M   Y   Y   Y   Y
0	Transfer of pension	Pension name	
		Pension Account number	
		Pension value	Currency:
			Amount:
		Transfer date	D   D   M   M   Y   Y   Y   Y
$\overline{}$			
$\bigcirc$	Transfer of pension	Pension name	
		Pension Account number	
		Pension value	Currency:
			Amount:
		Transfer date	D D M M Y Y Y Y

# FULL DETAILS OF ORIGIN OF WEALTH (CONTINUED)

Please tick the description option(s) relating to the original source of the premium for your bond. You must fully complete each relevant section relating to the description option(s) you have ticked.

<b>(</b> \$\sqrt{)}	Description	Details required	Your details
	Other	Origin of wealth	
		From which organisation or whom (state the relationship if applicable)	
		Details (including reasons where applicable, how the money was acquired, etc)	
		Total amount	Currency: Amount:
		Date received	
cc	ountry of residence o		port your application, particularly in relation to your process it. Your financial adviser can establish if further leation form.
evid	se enter what docur ence you are enclosi ication form (if applica	ing with this	

#### H ASSET CHOICE

#### APPOINTMENT OF AN AUTHORISED CUSTODIAN, FUND ADVISER OR DISCRETIONARY ASSET MANAGER

You can appoint up to three authorised custodians to hold your assets or alternatively you can hold some of your assets with an authorised custodian and some of your assets with our default custodian. The details of the authorised custodian(s) need to be inserted in the table below and in addition you need to complete the 'Request for Old Mutual International or Old Mutual International Ireland to appoint authorised custodian(s)' form.

You can appoint a fund adviser or request Old Mutual International to appoint a discretionary asset manager to manage the assets held with your chosen authorised custodian(s). You should add their names into the table below and you must complete an appointment form for each fund adviser and/or discretionary asset manager you wish to appoint to manage the assets held by each custodian.

You financial adviser will be able to provide you with these forms.

#### **DEFINITIONS**

**Default custodian** – assets held by Old Mutual International **Authorised custodian** – assets held by an authorised third-party custodian

Please complete the following with the details of how you would like your premium to be invested. Where assets are to be held by our default custodian and one other authorised custodian, we will subtract the amount shown for the authorised custodian from the overall premium amount, to determine the amount held with the default custodian.

Where you have appointed more than one authorised custodian you need to select a lead custodian who we will instruct to sell assets to pay for portfolio fund charges debited to the transaction account held with Old Mutual International. Please refer to your Policy Terms for further information on the portfolio fund charges debited to the transaction account held with Old Mutual International.

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

Please select the custodian(s) that will hold the assets. (tick one option only (/))	Name of custodian(s)	Please enter the name of the fun manager you wish to appoint to only appoint one discretionary of adviser to each custodian.	Monetary Amount	
		Fund adviser	Discretionary asset manager	
Assets held by our default custodian	Default		N/A	
Assets held by our default custodian and	Default		N/A	
one other authorised custodian				
Assets held by one authorised custodian				
Assets held by two	Lead custodian:			
authorised custodians				
	Lead custodian:			
Assets held by three authorised custodians.				

Please note you must complete a form for each fund adviser and/or discretionary asset manager you wish to appoint to manage your assets. Your financial adviser will be able to provide you with the forms.
Please tick which form(s) you are enclosing with this application form (✓)
Request for Old Mutual International or Old Mutual International Ireland to appoint authorised custodian(s)
Appointing a fund adviser to your Old Mutual International - International Portfolio Bond or Old Mutual International Ireland European Portfolio Bond
Request for Old Mutual International Isle of Man Limited ('Old Mutual International') to appoint a discretionary asset manager.

н	ASSET	CHOICE	(CONTINUED)
	AJJEI	4114141	CONTINUED

Please note that you can invest in as many assets held with our default custodian as you wish, subject to a minimum of £400 (or currency equivalent). Some asset providers may have a higher minimum investment requirement and this minimum will prevail.

Our default custodian						
Asset identifier ISIN	Asset name – please enter names in full	Accumulation/ income unit requirement (if applicable)	Share class (if applicable for A, B or C)	Base currency of security/fund (eg GBP, USD)	Investment % (whole% numbers only)	
	I .			Total	100%	

In case we need to clarify th	e asset choice details above, please provide us with a contact name and telephone number.
Contact name	
Daytime telephone number including area code	
Evening telephone number including area code	
Fax number	
E-mail address	

# REGULAR WITHDRAWALS (OPTIONAL)

Only complete this section if you wish some or all of the assets to be held by our default custodian.

Please complete this section if you wish to receive regular withdrawals from the trust's policy (other than the fees to your financial adviser that you have requested us to pay).

▶ PLEASE NOTE THAT THE MINIMUM AMOUNT FOR ANY REGULAR WITHDRAWAL PAYMENT, REGARDLESS OF FREQUENCY, IS £400 (OR OTHER CURRENCY EQUIVALENT).

WITHDRAWAL AMO	DUNT									
Authorised custodian	vithdrawals to be paid from an au	rnational			-					(V)
Amount to be withd	rawn each year									
or <b>Percentage of initial</b>							%			
Withdrawal frequency (	Monthly Bi-Month	nly Qua	rterly 🔘	Four Month	y (Termly)	Он	alf-yearly		Yearly	/
Date of first paymen	nt					D D	М	M Y	Y	YY
If there are any furt tick here	her nominated assets, plea	se photocopy	y this page	, attach th	e detail:	s with t	his ap <sub>l</sub>	olicatio	on for	m and
NOMINATED ASSET	r(s)									
This will only apply when Nominated Assets are or	s) listed in Section H is/are to be use you have not chosen an authorially applicable if Old Mutual Internation nominated assets, please photoco	sed custodian. ational pays the	e withdrawals	and the ass	ets are hel	ld with th			ian.	
ISIN		Name								
ISIN		Name								
ISIN		Name								
ISIN		Name								
ISIN		Name								
PAYEE DETAILS										
Payments can be made to	o the underlying member.									
Do you want your withdr	rawals to be paid to the same ban	ık account detai	led in Section	G 'Source o	of funding	and orig	in of we	alth'?(	Yes	○ No
If 'No' please complete y	our chosen bank details below.									
Until further notice, we w	ould like regular withdrawals to b	pe made to:								
Bank account holder (name as stated on bank account)										
Bank account number/ IBAN										
Sort code (applicable to UK accounts)										
SWIFT or BIC code										
Bank name										
Bank address										
	Postcode									
Country										

#### **DECLARATION AND APPLICATION**

#### **DATA PRIVACY STATEMENT**

Old Mutual International Business Services Limited and Old Mutual International Isle of Man Limited will process information ('Personal Data') about me and any other party whose Personal Data has been supplied.

The processing of Personal Data will take place in a number of jurisdictions. Personal Data will be processed and may be released to other parties within or outside the Old Mutual Group for the following purposes to:

- check against credit reference or other databases to verify information provided for regulatory due diligence purposes and to prevent or detect financial crime including money laundering, terrorist financing, bribery and corruption, or fraud;
- allow for the provision of services relating to reinsurance, data hosting, online services, payment or reporting of any tax or levy, or any other services provided to policyholders from time to time;
- enable an appointed financial adviser or fund adviser to assist in the provision of services to the policyholder;
- compile statistical analysis or market research, where information is not specific to the individual;
- comply with any legal obligation which includes the releasing of Personal Data to regulators, law enforcement authorities or other bodies where it is
  a legal requirement to do so, including the sharing of information under regulations relating to the U.S. Foreign Account Tax Compliance Act and
  OECD Common Reporting Standards.

Where Personal Data is released to a third party for the provision of services relating to a Policy, the Personal Data will only be used for the purposes for which it is released and will be subject to adequate security and protection. In some circumstances this may involve a transfer of data to a third party outside the European Economic Area (EEA). On receipt of a request to do so and on the payment of a small fee a copy of an individual's Personal Data will be provided to that individual. Any inaccuracies in an individual's Personal Data records will be rectified.

Any questions about Data Privacy should be addressed to the Data Protection Officer, Old Mutual International Isle of Man Limited, King Edward Bay House, King Edward Road, Onchan, Isle of Man, British Isles, IM99 1NU.

#### **WARNING**

Please read the following declaration carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the International Portfolio Bond – Life PRIIPs or International Portfolio Bond – Redemption PRIIPs. A material fact is one which is likely to influence the assessment and acceptance of the application. If you are uncertain whether a fact is material, you should give full details so that we can assess its possible significance. If you become aware of such a fact while we are considering your application, you should notify us immediately.

You should satisfy yourself that you are able to effect the proposed contract under any taxation, exchange control or trust and insurance law to which you may be subject.

#### **DECLARATION - BY THE AUTHORISED SIGNATORIES FOR A CORPORATE TRUSTEE**

A copy of this completed application form is available on request.

Old Mutual International Isle of Man Limited will be referred to as Old Mutual International throughout this declaration.

- 1. We understand that we will have an Online Service Account set up, should we wish to activate it. If we do activate our Online Service Account, whilst we are submitting this application through our financial adviser to your Head Office, we agree that:
  - (a) we will apply for and sign onto our Online Service Account; and
  - (b) all Policy Transactions will be made by us using our Online Service Account where the Online Service allows, unless we have requested otherwise; and
  - (c) all communications from you will be through our Online Service Account where the Online Service allows, unless we have requested otherwise.
- 2. We understand and agree that we are applying to enter a new contract with Old Mutual International, it will be subject to the laws of the Isle of Man and the Policy Terms will be in the English language.
- 3. We request that the Lump Sum referred to as a Premium is invested as we have instructed as an initial premium for policies comprising either an Old Mutual International International Portfolio Bond Life PRIIPs (ref IPBv3) or an Old Mutual International International Portfolio Bond Redemption PRIIPs (IPBRv3), and we request Old Mutual International to issue the policies in the name of the trust.
- 4. We declare to the best of our knowledge and belief that the statements made in this application, and any related documents, are true and complete. We have not concealed a material fact. We agree to provide Old Mutual International with any further information in respect of this application on request.
- 5. We confirm that investment into an Old Mutual International International Portfolio Bond Life PRIIPs or an Old Mutual International International Portfolio Bond Redemption PRIIPs is within the investment powers available to us as trustees of the trust.
- 6. We confirm that the trust company has not been, or is not in the process of being, dissolved, struck off, wound up or terminated.
- 7. We confirm that Old Mutual International has not provided any investment advice and we or our fund adviser are responsible for the selection of assets to be linked to our Portfolio Fund. We acknowledge that Old Mutual International is not responsible for any loss suffered or reduction in the value of our Policy arising from our investment. Old Mutual International does not have any responsibility for the management of the underlying assets chosen other than Internal Funds, which are invested in accordance with the criteria as published in the relevant fund factsheet and carrying out a treasury function in respect of the Transaction Account and Old Mutual International does not recommend any asset as a suitable investment.
- 8. We confirm that the trust company is not incorporated in the United States of America or its territories. If the trust company becomes incorporated in the United States of America or any of its territories, we understand Old Mutual International may not be able to accept any further premiums until after the trust company ceases to be incorporated in the United States of America or its territories.

# DECLARATION AND APPLICATION (CONTINUED)

- 9. We confirm that we have received a copy of the following items and we have had the opportunity to read them before reviewing and signing/approving this application: Key features of your International Portfolio Bond Life PRIIPs or International Portfolio Bond Redemption PRIIPs, Details of your Old Mutual International International International Portfolio Bond Life PRIIPs (ref IPBv3) Policy Terms, Unlocking the secrets of intelligent investing product brochure, the relevant 'at a glance' document and Explaining your Portfolio Bond fees and charges and if applicable, Key Information Document (KID) for the policy and Asset Key Information Document(s) (KIDs) and, where appropriate, the Asset Key Investor Information Documents (KIIDs). Furthermore, we agree that where we choose to change assets of the portfolio fund in future, we will ensure that we will obtain Asset Key Information Document(s) for those assets before they are purchased.
- 10. We authorise and request Old Mutual International to effect the facilitation of any initial fee to be taken before the investment is paid into the Policy, if applicable to our application, and we confirm that such payments will discharge Old Mutual International from all liabilities and claims arising from the payment of that initial fee. We understand that this authority supersedes any authority previously given.
- 11. We authorise and request Old Mutual International to effect the Regular Withdrawals or Part Surrender transactions on our policy to facilitate advice fees we have agreed to pay to our financial adviser in accordance with the details shown in Section E and/or to effect Regular Withdrawals as detailed in Section I, if applicable to our application, and we confirm that such payments will discharge Old Mutual International from all liabilities and claims arising from those Regular Withdrawals or Part Surrender. We understand that this authority supersedes any authority previously given.
- 12. We may wish to invest into professional/non-retail type investment schemes and, if so, we will make sure that we have had the opportunity to read the offering documents for assets of this nature. Where we decide to invest in professional/non-retail type investment schemes, we accept the levels of risk associated with these, including the risk that the investment into such a scheme could result in a loss of a significant proportion, or all, of the sum invested
- 13. We understand that in cases where the asset(s) we have selected is/are not redeemable for a certain period of time, Old Mutual International may not be able to return that part of our payment until the end of that period. The description of the assets we have chosen will give details if this applies. We may invest immediately into non-daily dealing assets with the understanding that in the event of cancellation or requiring early access that:
  - (a) we may not get our money back immediately and payment may be delayed for some time;
  - (b) the institution may impose penalties and therefore we may get back less than we invested, and/or
  - (c) the only way in which to receive value may be through a transfer of ownership of that asset into the name of the Trust
- 14. We consent to our personal data being used in accordance with the Data Privacy Statement.
- 15. We appoint the financial adviser to act on our behalf in accordance with the Policy Terms.
- 16. We confirm that where this application is for a an Old Mutual International International Portfolio Bond Life PRIIPs that each life assured consents to this application and agrees to our acting as their agent for the purpose of the information provided in this application.
- 17. We confirm that the company shares are not held in bearer form and will not be converted to bearer share form.
- 18. I have read and understood the Data Privacy Statement set out above and will make it available to other individuals whose Personal Data has been provided to Old Mutual International either in this application or within accompanying documentation.

#### Appointment of a Lead Policyholder - for a corporate trustee

- We agree to the appointment of the Lead Policyholder, who is named in this application, for the policies comprising our Old Mutual International

   International Portfolio Bond Life PRIIPs or our Old Mutual International International Portfolio Bond Redemption PRIIPs in accordance with
  the Policy Terms.
- 2. We understand that this appointment is revocable and can be changed at any time (as explained in the Policy Terms).
- 3. We understand that by agreeing to the appointment of the Lead Policyholder we authorise the Lead Policyholder to provide Old Mutual International with instructions to carry out and request certain Policy Transactions on behalf of all policyholders. The instruction or request shall be deemed to have been addressed, sent and authorised on behalf of all policyholders.
- 4. We confirm that the provisions of the trust allow delegation of authority to one trustee to act on behalf of all trustees. We confirm that it is legally permitted for the company to delegate to one authorised signatory solely.
- 5. We understand that these instructions will be legally binding and that Old Mutual International can act on instructions received from the Lead Policyholder.
- 6. We understand that the company has authority to delegate all decisions on behalf of the company to the Lead Policyholder.

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

continued

This application	n must be completed by the authorised signatories for the corporate trustee unless you have aske	d your financial a	dviser to complete i
Did you con	plete this application form yourself? (/)	Yes	○ No
f 'No', did	a third party, such as your financial adviser, complete it on your behalf? (/)	Yes	○ No
	declaration you confirm that you have read through the above declarations on pages 11 to 13 mn on the trustees' behalf, that all the information provided in it is correct.	and, if a third part	y has completed the
Authorised s	ignatories for corporate trustee applicant		
Name	Capacity		
Signature	Date	D D M M	YYYY
Name	Capacity		
Signature	Date	D D M M	Y   Y   Y   Y
Name	Capacity		
Signature	Date	D D M M	Y   Y   Y   Y
Name	Capacity		
valle.	Capaciny		
Signature	Date	D D M M	YIYIYI

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

#### K VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE

#### THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.

▶ Please note that we will not be able to commence the policy until this section has been completed and you have provided the necessary identification documentation.

Outlined below are the standard minimum requirements. In some circumstances we may need additional information. Enclosed (/) **Corporate trustees** 1. A list of directors' names. Verification of the identity of at least two directors, one of whom must be an executive director. A list of authorised signatories, specimen signatures and evidence of their signing power(s). The corporate trustee's Certificate of Incorporation or other official registration document. 5. Evidence of the registered office of the corporate trustee. Trading company – a copy of the latest annual reports and accounts. Non-trading company – evidence of the origin of wealth. Private limited companies - verification of the identity of all shareholders holding 25% or more of the issued share capital as at the date of application. Where the shareholders are not individuals we will require verification of the identity of the ultimate beneficial owner of those entities and their relationship to the company. Evidence of the appointment of trustees (for example a certified copy of an extract from the trust deed, but not the whole deed) if the application is in respect of an existing trust. All information should be provided on letterhead. **Confidentiality** 

Any information given by the client(s) or their financial adviser will be used solely by members of the Old Mutual group of companies.

#### Verification of identity of individuals

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

▶ Please tick (✓) to indicate the identification you have supplied for each individual party to the bond. If a fund adviser has been appointed we may need to verify the identity of the appointee.

	ieu we may ne	ed to verify the identity of the appointee.
PART A		INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED
1. Name		
Capacity		
Type of document	Passport	National identity card
Document reference		
Document reference		
2. Name		
Capacity		
Type of document	Passport	National identity card
Document reference		
3. Name		
Capacity		
Type of document	Passport	National identity card
Document reference		
4. Name		
Capacity		
Type of document	Passport	National identity card
Document reference		
DADT A DEACON		IENTS ARE NOT RROVINER (IF ADDICADED)

VERIFICATION OF CUSTOMER IDENTITY - FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE (CONTINUED)

PART B	INDIVIDUAL WHOS	E RESIDENTIAL ADDR	RESS IS BEING VERIFI	ED
These must be less than three months old	1	2	3	4
A recent utility, rates or council tax bill     (mobile/cell phone bills not acceptable)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
A recent mortgage statement, giving the residential address	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
3. An extract from the official register of electors				$\bigcirc$
<ol> <li>A state pension, benefit or other government produced document showing benefit entitlement</li> </ol>	$\bigcirc$		$\bigcirc$	$\bigcirc$
5. A recent tax assessment document	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
<ol> <li>A recent account statement from bank or credit card (store cards not acceptable)</li> </ol>	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
<ol><li>Proof of ownership or rental of the residential address</li></ol>	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\circ$

#### PART C FINANCIAL CRIME - RISK RATING

▶ Please refer to the origin of wealth guidelines (available from Old Mutual International) for information on how to complete the table below.

To prevent financial crime, Isle of Man authorised life companies may adopt a 'risk-based approach' when obtaining evidence of the origin of a client's wealth. In order to speed up the application process we have provided you with the table below to allow you to find out your client's risk rating before submitting the application form to us. We highly recommended that you complete the risk rating as it allows you to determine if you need to enclose further documentary evidence with the application form or not. If we do not receive the necessary documentary evidence with the application form, then it will take longer to process the business.

In order to decide what risk rating applies to your client's investment you need to take into account the following factors:

- (a) your client's country of residence
- (b) which country the premium is paid from.
- (a) + (b) = total risk rating

Applicant	Client country of residence (a)	Country of premium funding (b)	Total risk rating
Example	Switzerland (1)	UK (1)	2

Old Mutual International reserves the right to request further documentation if it is felt appropriate. Please note that each new application, or application for an additional investment, will be reviewed individually.

If you are unsure about a particular application, please contact your Old Mutual International business consultant in the first instance, or alternatively contact Old Mutual International's Sales Support team directly on +44 (0)1624 655 010.

## FINANCIAL ADVISER/SUITABLE CERTIFIER DECLARATION

#### THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.

#### **DECLARATION BY THE FINANCIAL ADVISER/SUITABLE CERTIFIER**

I declare that:

- I have verified the contents of the original documents where copies have been enclosed and confirm that they are true copies of the original.
- I have taken reasonable steps to make sure that the funding is legitimate and in line with the member's circumstances.
- To the best of my knowledge and belief, all the information provided in and with this application is true and complete and was obtained from the member who is of good standing. I also confirm I will provide further information if required.
- I have not made any changes to the application form after the authorised signatories for the corporate trustee have signed it.

I confirm that I gave advice concerning this investment to the member in	Country
on	D D M M Y Y Y Y
I confirm that, if applicable, all information provid	ed was received directly from the member.
Regulatory body authorisation number (if applicable)	
Regulator name	
Old Mutual International financial adviser account number	
Full name of introducer firm	
Full name of financial adviser/ suitable certifier	
Signature of financial adviser/ suitable certifier	
Date	D D M M Y Y Y Y
Financial adviser stamp	

### 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.

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Phone: +44 (0)1624 655 555 Fax: +44 (0)1624 611 715. Licensed by the Isle of Man Financial Services Authority.

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

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