Quilter International

Starting or
Adviser ID
Adviser ID
Name of fina
Company na
Address

International
Ireland European
Collective
Investment/
Executive Investment

Customer ID number(s) If known please enter the Customer ID number(s)
Applicant 1
Financial adviser details
Quilter International Ireland account reference
Adviser ID
Name of financial adviser
Company name
Address
Telephone number
Fax number
E-mail address
Quilter International Ireland only accepts business introduced by companies which have Terms of Business with us.

For the individual and corporate investor under Cypriot Law

Bond - PRIIPs

For Cypriot resident applicants only

This document was last last updated in February 2020. Please confirm with your financial adviser that this is the most up-to-date document for your 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 Quilter International Ireland. You are responsible for their actions or omissions.

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

All references to Quilter International Ireland, we, us and our in this application form mean Quilter International Ireland dac.

Taxation information

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

Important information for you - the applicant

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.

For ease of reference we have used an arrow \triangleright to highlight certain facts and sometimes to let you know that you can find further information and explanations in the relevant guidance notes.

Online service account on wealth interactive

For individual applicants, when you apply for your Quilter International Ireland product, we will automatically set you up with an Online Service Account on our Wealth Interactive service. You will receive an email 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.

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

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 the applicant or all trustees, or corporate signatories.

Please note that we must receive your application form by post or courier, we are unable to accept faxed or e-mailed versions. 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.

Section A – Type of application

Type of application

The type of bond cannot be changed after it has been set up. Please select one product from the selection below. (1)

European Executive Investment Bond - PRIIPs (Terms ref E04v4)

European Collective Investment Bond - PRIIPs (Terms ref E05v3)

Type of client: Individual Corporate

Additional investment

If this is an application for an ADDITIONAL INVESTMENT, please provide your existing bond number: (you can find this in your policy documentation)

•	•	,	•	•			
Unless your details	have changed,	you on	ly need to co	mplete the ful	l forename(s) and	surname of each	policyholder
and life assured (if a	applicable) in s	ection l	B and C. You	must also com	plete sections D, I	E, F, G, L, M and N	l .

Other (state currency)

Policy currency

I wish my policy to be valued in (\checkmark) \in US\$ £

Please note if no currency is entered your policy currency will be Euros (€). The policy currency cannot be changed after the policy is set up.

▶ If you are paying your premium in a different currency to your chosen policy currency, please refer to section A of the guidance notes.

Appointment of an autho	rised cust	odian		
Please tick if you wish to a	ppoint an	authorised custodian	(✓)	Authorised custodian
Name of custodian				
Address of custodian				
, ladi ess of eastedian				
		omplete the Request to	transfer to an autho	orised custodian account form which is
available from your financial				
Lead Policyholder (must b				
access and transact online o			any must appoint a	n individual as the Lead Policyholder to
The company appoints		to act as th	e Lead Policyholde	of the policies comprising its Portfolio Bond
in accordance with the Policy	y Terms.			
Full name				
Telephone number			E-mail address	
Section B1 – Details	of the ap	plicant		
In this section, please give do			ne Applicant must b	e at least 18 years old and the maximum age
Applicant				
Title (✔)	Mr	Mrs	Miss	Other
Full forename(s)				
Surname				
Sex (✔)	Male	Female	Date of birth	
Nationality			Dual nationality (if applicable)	
Passport number/national identity card number			Country of habitual reside	nce
Tax reference number				
Residential address (where you are currently living.				
We are unable to accept PO Box or C/O addresses)				
Correspondence address				
Please refer to section Bof the guidance notes.				

If the applicant is also going to be a life assured, please tick here ()

Quilter International Ireland accepts no responsibility for the consequences of sending documentation to this correspondence address, or to an address notified subsequently. Quilter International Ireland reserves the right to send correspondence to my residential address where regulations prevent it being sent to a third party.

Telephone number including area code (daytime)

E-mail address

Telephone number including area code (evening)

Reason for investment (for example, saving for retirement)

Section B2 - Details of the applicant

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

Corporate applicant			
Please tick (✔)	Private company	Public company	Other
Corporate name			
Contact person			
Country of registration			
Date of incorporation			
Registered or Residential office address			
(This information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses)			
Correspondence address ▶ Please refer to section B of the guidance notes			
Quilter International Ireland accepts no address, or to an address notified sub- residential address where regulations	sequently. Quilter Inter	national Ireland reser	ding documentation to this correspondence ves the right to send correspondence to my
Telephone number including area code (daytime)	ū		
E-mail address			
Corporate website address			
Please state the company's main business (for example manufacturing or trading company)			

Authorised signatories

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

The company directors/authorised signatories of the company must complete and sign the declaration In section M.

▶ Additional documents are needed to evidence the identity of at least two directors, one of whom must be an executive director of the company. Plus, if different to this, we also need to verify the identity of those who have signed the application form – please refer to section b of the guidance notes for further details.

$Section\,B3-Details\,of\,the\,applicant$

Employment details

This section must be completed in all instances for an individual applicant

Please give details of your employer or your own company, if self-employed.

If you have retired or are not currently employed please include details of your previous employer or your own company. If you have never been employed, please state N/A.

Please also enter your final year's salary/income and bonus if any.

Employment status (✓)	Empl		,	mployed	Retired	Not employed
Occupation						
Name of employer or your own company						
Address of employer or your own company						
Country						
Website address of employer or your own company (if any)						
Last year's gross salary/income amount						
Currency (✔)	£	US\$	€	Other (st	ate currency)	
Last year's bonus amount (if applicable)						
If you receive income from another source eg dividends, interest; pleas provide details here						
Section B4 – Politically expo	sed perso	n – this se	ection ref	ers to all a	pplicant types	
If the applicant, or any other party opolitically exposed person, or conne	connected to ected with a	o this applic a politically e	ation eithe exposed pe	r now or in t rson, please	he past/future, could provide details.	be classed as a
► For examples of what a political	ally expose	d person is	please re	fer to sectio	n B of the guidance	notes.
Section B5 – Existing cont	tracts					
Please provide details of any existin		ternational I	reland con	tracts you h	ave or are making pay	ments to (if applicable)
	Type of	contract			Type of contract	
	Policy r	number			Policy number	

The applicant must complete and sign the declaration in section M

► Additional documents are needed to evidence your identity – please refer to section b of the guidance notes for further details

$Section\ C$ – $Details\ of\ the\ life/lives\ assured\ (if\ different\ from\ the\ individual\ applicant)$

Please note you do not need to complete this section if the individual applicant is going to be the only life/lives assured, if that is the case please just tick where indicated in section B.

The maximum age for a life assured is 89.

▶ Please refer to section C of the guidance notes which have more details on the life/lives assured.

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

▶ If additional pages are added, each separate page must be initialled by the applicant.

If there are two or more lives assured the policy will end on the death of the last of the lives assured

	First additional life as	sured (if any)	Second additional life assured (if any)		
Title (✔)	Mr Mrs Mis Other	SS	Mr Mrs Other	Miss	
Full forename(s)					
Surname					
Sex (✔) Address	Male	Female	Male	Female	
Tax reference number					
Date of birth					
Nationality					
Dual nationality (if applicable)					
Residential address (We are unable to accept PO Box or C/O addresses)					
Country of residence					

$Section\,D$ – $Source\,of\,funding$

This section must be completed in all instances.

Source of funds

- ▶ The premium payment must come from an account held in the name of the applicant
- ▶ Before completing this section, please refer to section G of the guidance notes for information about your payment and origin of wealth.
- ▶ If you are making multiple payments, please photocopy this page, attach the details and the reason why multiple payments are being made with this application form and tick here (✓)

Payment amount	Payment currency						
Bank account holder (name as stated on bank account)							
Bank account number/IBAN							
Sort code (If applicable)							
SWIFT or BIC code (If applicable)							
Bank name							
Bank address							
Country							
How long have you held this account	years months						
	 Accounts within the UK, Jersey, Guernsey, Isle of Man or Gibraltar require a bank account number and sort code. Premium payments made from banks outside the UK require a SWIFT or Bank Identifier Code (BIC), and an International bank account number (IBAN). 						
Section E – Investment detai	ls						
	ease refer to section E of the guidance notes for information about paying in your ount, and the number of bond policies.						
Premium payment							
Currency (✔)	€ £ US\$ Other (state currency)						
Premium amount							
Payment method (✔)	Electronic bank transfer Asset transfer						

▶ The premium payment must come from an account or transferred shares held in the name of the applicant(s).

Stamp duty will be deducted by Quilter International Ireland from the premium we receive and paid to the Inland Revenue of Cyprus on your behalf.

Section F - Asset choice

Please use this section to list any stocks, shares, external funds and Quilter International Ireland internal funds which, in addition to those funds listed on the 'asset transfer form' (if applicable), should form the investments of your portfolio fund in your policy.

Please indicate your investment choice, using whole percentages only. A minimum of €3,750/£2,500/\$3,750, or other currency equivalent, must be invested in any fund selected. You must maintain a holding in the deposit fund or a bank deposit in your chosen policy currency to meet portfolio fund charges or withdrawals.

Quilter International Ireland does not provide investment advice and has no responsibility for the performance of your selection of investments. It is for you and your fund adviser to choose the investments most suitable for you.

For full details of investment restrictions, please refer to the Policy Terms. The list below shows examples of the types of investment we might accept/refuse.

Permitted Investments for the European Executive Investment Bond and European Collective Investment Bond Quilter International Ireland internal funds, Collective investment schemes and UCITs, Bank deposits

Non-Permitted Investments for the European Executive Investment Bond and European Collective Investment Bond Commodities, Any illiquid investments, Any assets that are difficult to value.

Please note that most stocks and shares quoted on stock exchanges recognised by us are also permitted investments for the European Executive Investment Bond ONLY.

Please note if we do not receive sufficient details, this will delay your investment.

Asset choice	Asset choice							
Security identifier ISIN	Security/Fund name – please enter names in full. If an Quilter International Ireland fund is chosen, please prefix the fund name with QINT IE.	Accumulation/ Income unit requirement (if applicable)	Share class (if applicable, for example A, B or C)	Base currency of security/ fund (eg GBP, USD)	Investment % (whole % numbers only)			
			Total	(must add up to 100%)				

▶ Please remember to ref we need to invest your p	er to section F of the guidance notes to make sure you provide us with all the information oremium without delay.
In case we need to clarify th	e asset choice details above, please provide us with a contact name and telephone number.
Contact name	
Telephone number including area code (daytime)	Telephone number including area code (evening)
Fax number	E-mail address

$Section \ G-Origin \ of \ wealth$

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.

This section must be completed in all instances

(✓) Description	Details required	Your details
Sale of shares Maturing investments Policy claim	Name of company that held your shares/investment/policy (for example bank, stockbroker or insurance company)	
Replacement policy	Name of person who held the shares/ investment policy	
	How were they sold? (ie bank, stockbroker or other agent, if applicable)	
	Description of shares sold (if applicable)	
	Reason for policy claim or replacement policy (if applicable)	
	Total amount paid out	Currency:
		Amount:
	Surrender penalty incurred (if any)	
	Date received	
	Shares/investment/policy held for	years months
Sale of property	Address of property sold (including postcode if applicable)	
	Total sale amount	Currency: Amount:
	Amount received:	
	Date of sale	

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.

(✓) Description	Details required	Your details
Other unearned income	Origin of wealth (if ticked gift or other)	
Sale of interest in company	Name of company, nature of business, total sale amount, amount received from the sale	
Inheritance	From which organisation or whom (state the relationship if applicable)	
Loan	Name of loan provider, address of loan provider, reason for loan Description of gift, reason for gift	
Gift Compensation	Details (including reasons where applicable, how the money was acquired, etc)	
Competition or gambling win	How was the money acquired	
Other	T. Colonia de	
	Total amount	Currency:
		Amount:
	Date received	

▶ We may also require additional documentary evidence to support your application, particularly in relation to your country of residence and investment amount, before we can process it. Your financial adviser can establish if further documentary evidence is needed by completing part C of section N1, or by contacting us before sending in your application form. For a list of the types of documentary evidence we may need, please refer to section G of the guidance notes.

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

Section H-Regular withdrawals (optional)

Withdrawal amount

Amount to be withdrawn each year

or

Percentage of premium to be withdrawn each year %

Withdrawal frequency (✓) Monthly Every 2 months Quarterly Half-yearly Yearly

Please note that a monthly withdrawal is only available for premiums over €150,000 or currency equivalent.

Date of first payment. (If your plan is not active on the due date then your first payment will be made on the next payment date according to the frequency chosen.)

Where you have requested the appointment of an authorised custodian, do you want Quilter International Ireland to consider allowing the authorised custodian paying regular withdrawals on Quilter International Ireland's behalf to you directly? please tick (🗸)

Nominated Asset(s)

If you would like us to pay regular withdrawals from specific assets held in your bond, please clearly indicate the percentage of each security/fund to be sold below. This will only apply where you have not chosen an authorised custodian.

Please note that you are required to keep a sufficient balance in your nominated asset to cover all withdrawals and fees debited to your policy. Therefore we are unable to pay any withdrawals or fees if there is an insufficient balance in your nominated asset.

specific assets held in your policy	nce notes for more information on taking regular withdrawals or paying fees from y. There may be a dealing charge for each sale made depending on the fee packag nominated assets, please photocopy this page, attach the details with this ()	
ISIN	Name %	
Payee details		
We will pay withdrawals to Policyholde	rs only. Please note that third party payments are not permitted.	
Do you want your withdrawals to be ma	ade to the same bank account detailed in section D 'Source of Funding' Yes	lo
If "No" please complete your chosen ba	ank details below.	
Until further notice, I would like regula	r withdrawals to be made to:	
Bank account holder (name as stated on bank account)		
Bank account number/IBAN		
Sort code (applicable to UK accounts)		
SWIFT or BIC code		
(SWIFT code needed for bank accounts outside E	Europe; BIC code needed for European accounts with an IBAN)	
Bank name		
Bank address		
Country		
Section I – Number of policie	es [
New contracts only		
Please enter the number of policies yo	ou would like:	

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

▶ We will issue 12 policy schedules per contract unless you request a different number of policies here. If you require more or less, please refer to section H of the guidance notes and insert the number required.

Section J – Fund adviser

Appointing a fund adviser to your Quilter International Ireland Portfolio Bond

▶ Before completing this section, please refer to section J of the guidance notes for information and which additional forms to include.

Please tick as appropriate (✓)

I have not appointed a Fund Adviser and I will act on an "execution only basis" (where I have requested the appointment of an Authorised Custodian in section A, I also include a complete 'letter of authority'); or

I appoint a Fund Adviser and enclose a completed 'appointing a fund adviser to your Quilter International Ireland Portfolio Bond' form and, where the Fund Adviser is not linked to any Authorised Custodian I have requested to be appointed in section A, a 'letter of authority'.

Section K - Quilter International Ireland charges

The charging structure for your bond is based upon the reference code provided on your application; this will dictate the level, term and type of charges that apply and these will be confirmed to you in your policy documents. These charges will include our administration costs together with those incurred in making any initial commission payment to your financial adviser.

If you have agreed to pay your financial adviser an ongoing commission payment then this will be reflected in the deduction of an additional Ongoing Service Charge equivalent to the amount paid.

Please enter the reference code for your chosen Quilter International Ireland charging structure which you confirm you have received and read in full (Your financial adviser will be able to provide you with this code).



Initial commission (if applicable)

Ongoing Service Charge (if applicable)

Section L – Nomination of beneficiaries – optional (note this section is not applicable to Corporate applications).

Complete this section if you wish to nominate a beneficiary for your Quilter International Ireland policy if you are BOTH the policyholder and the sole life assured.

You are able to designate that in the event of your death the benefits of the policy are payable to your chosen beneficiary or beneficiaries. Depending upon your country of residence it may be usual to nominate beneficiaries generically or by name.

If you wish to specify a percentage based division of the benefits please use whole numbers and ensure the total is 100%.

I nominate the following to receive the benefits of my policy in the event of my death:

Signature of applicant								
Signature of applicant								
Date								

Notes

- 1 Should you wish to avoid delays at claim stage we recommend you supply evidence of identity on named beneficiaries. If so, please provide certified evidence of identity and address and a complete the 'know your client' form (available from your financial adviser) for each beneficiary.
- 2 If a beneficiary dies before the applicant, then either the nomination will lapse or their share will pass to any remaining beneficiaries.
- 3 'Spouse' means the spouse to whom you are married or in a civil partnership with (and not separated from) at the time the death benefit is payable.
- 4 We recommend that you obtain legal advice before making any nomination.

$Section \, M$ – $Declaration \, and \, application$

Data privacy statement

I understand that Quilter International Ireland dac (QINT) and/or Quilter International Business Services (QINT's data processor) will process personal information about me and any other party whose personal information I have provided.

The type of personal information processed about me will depend on the purpose for which it has been collected and will include:

- my contact details
- information to verify my identity
- information about my family, lifestyle, health and finances
- my payment details.

The processing of my personal information may take place in a number of jurisdictions and may be shared with other parties within or outside Quilter plc for the general purpose of establishing, maintaining and servicing an insurance policy.

The sharing of my personal data may be used for any or all of the following purposes, to:

- check against credit reference or other databases to verify information provided for regulatory due diligence purposes and to
 prevent or detect financial crime including money laundering, terrorist financing, bribery and corruption, sanctions listing or
 fraud:
- allow for the provision of services relating to enhanced due diligence, underwriting, reinsurance, data hosting, online services, payment or reporting of any tax or levy, or any other services provided from time to time;
- enable an appointed financial adviser or fund adviser to assist in the provision of services to the policyholder;
- compile statistical analysis or market research, where information is not specific to the individual;
- comply with any legal obligation which includes the releasing of personal information to regulators, law enforcement authorities or other bodies where there is a legal requirement to do so, including the sharing of information under regulations relating to the U.S Foreign Account Tax Compliance Act and The Organisation for Economic Co-operation and Development Common Reporting Standard;
- enable an appointed discretionary asset manager or custodian to meet their legal or regulatory requirements, where that
 discretionary asset manager or custodian providing services in relation to a policy requests the personal data of an individual
 linked to an application, and where we are satisfied that such a discretionary asset manager or custodian has a legal or
 regulatory requirement to make such a request.

Where my personal information is shared with a third party for the provision of services relating to my policy, my personal information will only be used for the purposes for which it was collected. In some circumstances this may involve a transfer of my personal information to a third party outside the European Economic Area (EEA). Whenever my personal information is shared it will be subject to the same levels of security and protection that Quilter International would apply.

I may ask Quilter International to:

- provide a copy of personal information held about me and an explanation of how this data is processed;
- update or correct my personal information;
- delete information about me (where it is no longer necessary in relation to the purpose for which it was originally collected);
- restrict processing of my personal information where appropriate. I may also object to Quilter International processing my data but understand that this may have consequences in Quilter International being able to continue servicing my policy.

I have been made aware that a full explanation of how Quilter International collects, uses and shares my personal information can be found at **www.quilterinternational.com**

If I have any questions about data privacy I can address these to:

For Quilter International Ireland dac:

The Data Protection Officer, Quilter International Ireland dac, Hambleden House, 19-26 Lower Pembroke Street, Dublin 2, D02 WV96, Ireland.

If I have a complaint about the processing of my personal information and Quilter International is unable to provide a satisfactory response I may contact the appropriate regulator:

For Quilter International Ireland dac:

The Ireland Data Protection Commissioner, Canal House, Station Road, Portarlington, R32 AP23 Co. Laois, Ireland.

I have read and understood the Data Privacy Statement set out above and will make it available to other individuals whose personal information has been provided by me to Quilter International either in this application or within accompanying documentation.

Important information

Please read the declaration carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the European Collective Investment Bond – PRIIPs or European Executive Investment Bond – 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 insurance law to which you may be subject.

Declaration

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

Quilter International Ireland dac will be referred to as Quilter International Ireland throughout this declaration.

References to the word 'I' in this declaration refer to:

- (1) each applicant named in this application where they are individuals; or
- (2) each director/authorised signatory on behalf of the Company where the applicant is a company, including where the applicant is a trust company.

Declaration applicable to all applicants

- 1. I understand that I will have an Online Service Account set up, should I wish to activate it. If I do activate my Online Service Account, whilst I am submitting this application through our financial adviser to your Head Office, I agree that:
 - (a) I will apply for and sign onto my Online Service Account; and
 - (b) all Policy Transactions will be made by me using my Online Service Account where the Online Service allows; and
 - (c) all communications from Quilter International Ireland will be through my Online Service Account where the Online Service allows.
- 2. I request and agree that I am applying to enter a new contract with Quilter International Ireland, it will be subject to the laws of Cyprus and the Policy Terms will be in the English language.
- 3. I request that the Lump Sum referred to as a Premium is invested as I have instructed as an initial premium for policies comprising an Quilter International Ireland European Collective or Executive Investment Bond PRIIPs and I request Quilter International Ireland to issue the policies in:
 - (a) My name; or
 - (b) In the name of the Company, if applicable.
- 4. I declare to the best of my knowledge and belief that the statements made in this application, and any related documents, are true and complete. I have not concealed a material fact. I agree to provide Quilter International Ireland with any further information in respect of this application on request.
- 5. I confirm that Quilter International Ireland has not provided any investment advice and I or my fund adviser are responsible for the selection of assets to be linked to my Portfolio Fund. I acknowledge that Quilter International Ireland is not responsible for any loss suffered or reduction in the value of my Policy arising from my investment. Quilter International Ireland 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 Quilter International Ireland does not recommend any asset as a suitable investment.
- 6. I confirm that I am not resident or the Company is not incorporated in the United States of America or any of its territories. If I become resident or the Company becomes incorporated in the United States of America or any of its territories, Quilter International Ireland may not be able to accept any further premiums until after I cease to be a resident or the Company ceases to be incorporated in the United States of America or any of its territories.
- 7. I confirm that I have received a copy of the following items and I have had the opportunity to read them before reviewing and signing this application: Bond Illustration, Product Brochure, at a glance document, the Policy Terms (ref E04v4 or E05v3 as applicable), 'Where to find further information about units and funds linked to your Quilter International Ireland policy' and the relevant Tax and Other Important Information for Cyprus, Key Information Document (KID) for the policy and asset Key Information Document(s) (KIDs) and, where appropriate, the asset Key Investor Information Document(s) (KIIDs). Furthermore, I agree that where I choose to change assets of the portfolio fund in future, I will ensure that I will obtain asset Key Information Document(s) for those assets before they are purchased.

- 8. I am aware of the charges payable on the Policy, including the charges payable in respect of the investments which may be held within it. I understand the charges exist partly to meet advice, promotion and distribution expenses. These may include initial and on-going payments (such as commission) made to my financial adviser. These payments could be in addition to any commission payable by the investment provider to the financial adviser in respect of the investments held. I understand that Quilter International Ireland may receive payments in the form of fund manager rebates, from an investment provider in respect of the investments held, and which Quilter International Ireland may share with my financial adviser.
- 9. I may wish to invest into professional/non-retail type investment schemes and, if so, I will make sure that I have had the opportunity to read the offering documents for funds of this nature. Where I decide to invest in professional/non-retail type investment schemes, I 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.
- 10. I understand that in cases where the asset(s) I have selected is/are not redeemable for a certain period of time, you may not be able to return that part of my payment until the end of that period. The description of the funds and/or assets I have chosen will give details if this applies. I may invest immediately into non daily dealing funds with the understanding that in the event of cancellation or requiring early access that:
 - (a) I may not get my money back immediately and payment may be delayed for some time;
 - (b) the institution may impose penalties and therefore I may get back less than I invested, and/or
 - (c) the only way in which to receive value may be through a transfer of the ownership of that asset into the name of the Policyholder.
- 11. I appoint the financial adviser to act on my behalf in accordance with the Policy Terms.
- 12. I confirm that each life assured (or their parent where parental consent is required) consents to this application, and agrees to my acting as their agent for the purpose of the information provided in this application.
- 13. The premium detailed in this application and any other premium tendered in respect of this application are derived solely from the source of funding provided and have, where required, been declared to the relevant tax authority in my country of residence for taxation.
- 14. The application for an Quilter International Ireland policy is not being made for the purpose of concealing funds, assets or wealth with a view to the evasion of any taxes I am obliged to pay.

Additional declarations applicable to corporate applicants:

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

Additional declarations applicable to trust companies:

- 16. I confirm that the Company has not been, or is not in the process of being dissolved, struck off, wound up or terminated.
- 17. We confirm that investment into the Quilter International Ireland European Collective or Executive Investment Bond PRIIPs is within the investment powers available to the trustees of the trust.

Appointment of a lead policyholder - applicable where the applicant is a company

- 1. I agree to the appointment of the Lead Policyholder, who is named in this application, for the policies comprising Quilter International Ireland European Collective or Executive Investment Bond PRIIPs in accordance with the Policy Terms.
- 2 I understand that this appointment is revocable and can be changed at any time (as explained in the Policy Terms).
- 3 I understand that by agreeing to the appointment of the Lead Policyholder I authorise the Lead Policyholder to provide Quilter International Ireland 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 I understand that these instructions will be legally binding and that Quilter International Ireland can act on instructions received from the Lead Policyholder.
- 5. Where the Policyholder is a company, I confirm that it has authority to delegate all decisions on behalf of the Company to the Lead Policyholder.

application form was completed.				
This application must be completed by the applicant(s) unles	s you have asked your financial adviser to comple	ete it.		
Did you complete this application form yourself? (\checkmark)		Yes		No
If No, did a third party, such as your financial adviser, con	mplete it on your behalf? (🗸)	Yes		No
By signing this declaration you confirm that you have read th the application form on your behalf, that all the information ${\bf p}$		has com	nplete	:d
Signature of individual applicant	Date D D M			
Signature of Corporate applicant	Date D D M			
Signature of Corporate applicant	Date D D M I			
Further copies of the Policy Terms and Conditions and/or this	s completed application form are available on rec	uest.		

Section N1 – Verification of customer identity for individual investors – financial adviser/ suitable certifier to complete

This section must be completed in all instances for individual investors.

▶ Please note that we will not be able to set the bond live until this section has been completed and you have provided the necessary identification documentation. Please refer to section O of the guidance notes for more information on certifying documents.

Outlined below are the standard minimum requirements. In some circumstances we may need additional information.

We require one document from part A and one from part B. If neither document in part A is available, please provide the reason why and provide two formal documents showing appropriate personal details and verifiable reference numbers from part B. When certifying copies of original documents, the suitable certifier must provide the following:

- a statement to reflect that it is a true copy of the original
- their name
- their signature
- the date of certification

Identification documentation should be current and valid. Evidence of address should be the latest available, but no more than six months old.

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

Part A	Individual who	ose identity is being verified	
1. Name			
Capacity			
Type of document	Passport	National identity card valid from and to dates	Photographic driving licence
Document reference			

Part B

Individual whose identity is being verified

These must be less than six months old

Applicant 1

- 1. A recent utility, rates or council tax bill (mobile/cell phone bills not acceptable)
- 2. A recent mortgage statement, giving the residential address
- 3. An extract from the official register of electors
- 4. A state pension, benefit or other government produced document showing benefit entitlement
- 5. A recent tax assessment document
- 6. A recent account statement from bank or credit card (store cards not acceptable)
- 7. Proof of ownership or rental of the residential address

Part C Financial crime – risk rating

▶ lease refer to the guidance notes for the know your client form (available from Quilter International Ireland) for information on how to complete the table below and section G of the guidance notes for information about the documentary evidence we may need.

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

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

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

Applicant	Client country of residence (a)	Country of premium funding (b)	Total risk rating

Quilter International Ireland reserves the right to request further documentation if it is felt appropriate.

Please note that each new application, or application for an additional investment, will be updated individually.

If you are unsure about a particular application, please contact your Quilter International Ireland business consultant in the first instance, or alternatively contact Quilter International Ireland's International Sales Support team directly on 00353 1 479 3900

$Section \ N2-Nerification \ of \ customer \ identity \ for \ corporate \ investors-financial \ adviser/suitable \ certifier \ to \ complete$

All the following details and document	s should be provided	for all corporate a	pplicants:		
Please tick (✔)	Private company	Public compan	/ Other		
Full name					
Registered number					
Registered office address (in country of incorporation)					
Principal business address					
A list of names of the directors					
Corporate business (please provide details of yearly profits)					
Trustee business (please provide an indication of the total value of the trust assets)					
 Certified copy of the Certificate of I Certified authorised signatory list of operate an account Verification of identity of two direct Verification of identity of one signal above) Verification of identity of beneficial 	or extract from board tors of the company tory empowered to gi	minutes empower	ing a named pers	son to open/	I
Capacity (✔)	Director	Signatory	Beneficial Owner 25% or more	of	Beneficiary
1. Name		D	ate of birth		
Address					
Capacity (✔)	Director	Signatory	Beneficial Owner 25% or more	of	Beneficiary
2. Name		D	ate of birth		
Address					
Capacity (🗸)	Director	Signatory	Postcode Beneficial Owner 25% or more	of	Beneficiary

3. Name	Date of birth	
Address		

Section N3 – Nerification of customer identity for corporate trustee investors – financial adviser/suitable certifier to complete

Identification of Trust company

Please note points 1-5 below only need to be completed once for each corporate trust company, and we will then keep these details on file.

Enclosed (✓)

- 1. Certified copy of the Certificate of Incorporation or search result from relevant company registry
- 2. Certified authorised signatory list or extract from board minutes empowering a named person to open/operate an account
- 3. Verification of identity of two directors of the company complete details in section N2 above
- 4. Verification of identity of one signatory empowered to give instructions (if not one of the directors identified above)
- 5. Verification of identity of beneficial owners with greater than 25% of the shares or voting rights or who otherwise exercise control

Identification of the underlying trust

Enclosed (✓)

- 1. Copy of trust deed
- 2. Verification of identity of one trustee
- 3. Verification of identity of one signatory empowered to give instructions
- 4. Details of all the parties to the trust complete details in section N2 above:
- 5. Please provide an indication of the total value of the trust assets

Section O - 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 originals.
- I have taken reasonable steps to make sure that the funding is legitimate and in line with the client'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 applicant(s) who is/are 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 client has signed it.

I confirm that I gave advice concerning	
this investment to the applicant(s) in	

^{*} A full definition of beneficial owner available in the guidance notes for the know your client form.

on

I confirm that, if applicable, all information provided was received directly from the applicant(s).

Regulatory body authorisation number (if applicable)

Regulator name

Quilter International Ireland financial adviser account number

Full name of introducer firm

Full name of financial adviser/ suitable certifier

Signature of financial adviser/ suitable certifier

Date

Date

Date

Date

Date

Date

Date

www.quilterinternational.com

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

Quilter International Ireland dac is regulated by the Central Bank of Ireland. Registered No 309649.

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Quilter International is registered in Ireland as a business name of Quilter International Ireland dac.

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