

# Application form

UAE licensed financial adviser and policy details				
Company name				
Friends Provident International Limited agency number				
Contact details for acknowledgement/queries on the application.				
Contact name				
Phone number				
Email address				

#### Please complete all details.

This form should be read in conjunction with the following documents which will be provided to you by your UAE licensed financial adviser:

- Reserve+ Brochure.
- Your personal Charging structure illustration.
- Reserve+ Charging structures document.
- Reserve+ Product guide
- Reserve+ Performance guide

Please complete this form using BLOCK CAPITALS throughout. Please tick boxes where applicable and follow the instructions provided in each section.

Specified US Person means a US citizen or tax resident individual who has a US residential/correspondence address or who either holds a US Passport, a US Green Card or who was born in the US and has not yet renounced their US citizenship. More information on US FATCA can be found at: www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA.

If you choose Yes to being a Specified US Person, you will need to provide us with your US Taxpayer Identification Number (TIN) or US Social Security Number (SSN).

If you choose No but you have a US residential/correspondence address, hold a US Passport, a US Green Card or you were born in the US, you will need to provide us with documentary evidence that you are in the process of or have renounced your US Citizenship. Friends Provident International can accept a certified copy of your DS-4083 form (also known as CLN - Certificate of Loss of Nationality) and/or a certified copy of your passport in which you are obtaining new citizenship.

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

We will accept emailed or faxed scans of applications. However, we reserve the right to request original documents in some circumstances, so these must be retained in your records. Where the policyholder is resident in Africa, we will still require original signed instructions.

Once you have completed and signed the application, you should send it along with all requested additional information to: newbusiness@fpinternational.com or alternatively post it to: New Business Team, Friends Provident International, Royal Court, Castletown, Isle of Man IM9 1RA. British Isles.

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

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

All references to FPI within this application form mean Friends Provident International Limited.

An Arabic version of this document will be made available upon request.

Throughout this document, purple text denotes policy exclusions.

Reserve+ is available only for non-UK residents.

#### **Investor status**

Friends Provident International Limited (FPI) is required to obtain a declaration from you to confirm your investor status, which defines the assets in which you may invest.

Your Investor status is used by us to understand the types of asset you wish to invest in. You should let us know whether you wish to hold Retail or Non-Retail assets. If you do not tell us we will assume you are a Retail Investor and wish to hold retail assets only.

To assist with customer classification, Friends Provident International Limited's definitions of a Retail and Non-Retail investor can be found below:

#### **Retail Investor**

A Retail Investor is any investor other than a Non-Retail Investor (see below).

#### Non-Retail Investor

- 1 A government, governmental institution or authority, or companies fully owned by any of the aforementioned.
- 2 International bodies and organisations.
- **3** A person or entity licensed to engage in a commercial business, provided that one of the purposes of its business is managing investments, including:
  - a) A person, body corporate, partnership, trust or other unincorporated association whose ordinary business or professional activity includes acquiring, underwriting, managing, holding or disposing of investments, whether as principal or agent or giving advice about investments;
  - b) Any director or partner of, or consultant to, a person referred to in paragraph (a);
  - c) A functionary to a professional investment vehicle or an associate of a functionary to a professional investment vehicle;
  - d) An employee, director or shareholder of, or consultant to, a person in (c) who is acquiring the investment as part of his remuneration or an incentive arrangement or by way of co-investment;
  - e) A trustee of a family trust settled by, or for the benefit of, one or more persons referred to in paragraphs (c) or (d);
  - f) A trustee or operator of any employment benefit or executive incentive scheme or trust established for the benefit of persons referred to in paragraphs (c) or (d) or their dependents;
  - g) A government, local authority, public authority or supra-national body.
- 4 A natural person who declares that their annual income is not less than £250,000, or their net equity with the exception of their main home, exceeds £1,000,000.

It is your responsibility to obtain and read the prospectus and/or offering documents of any assets that you wish to hold in Reserve+. This will help you decide whether the asset is suitable for you.

This will help you decide whether the asset is suitable for you.					
By ticking one of the boxes below you are declaring that you meet the definition as detailed above.					
Retail Non-Retail					
If you have ticked the box above to indicate you are a Non-Retail Investor, and you have chosen to invest in what FPI considers to be					
Non-Retail assets, there may be a requirement for you to complete and sign an additional – asset specific – declaration(s). If this is					
equired, the relevant declaration(s) will be provided by our Technical Investments Team at the time the trade is placed.					

Reserve+ is available to those aged 18 and over. For lives assured, the minimum age is two years old and at least one life assured must be 80 or younger at inception.

# Section 1: Setting up Reserve+

Your details										
		First (or o	nly) applic	ant		Second	applicant			
1 Title		Mr	Mrs	Miss	Ms	Mr	Mrs	Miss	Ms	s
		Other				Other				
2 Surname (as shown on pas	sport/ID card)									
3 Forename(s) (as shown on ID card)	passport/									
4 Passport number/ID card										
5 Country of issue										
6 Marital status										
7 Date of birth (DD/MM/YYY	(Y)									
8 Please tell us where you w	ere born	Town				Town				
		Country				Country				
9 Country of residence										
10 Residential address									,	
11 How long have you lived at	this address?									
12 Email address (mandatory)										
13 Are you a Specified US Per	rson?	Yes	No			Yes	No			
Please see the Completion definition of Specified US F the information a Specified must provide.	Person and for									
14 Tax Identification Number										
If unavailable, provide a fur equivalent (e.g. National In: Number, Social Security No Resident Registration Num	surance umber,									
15 Correspondence address ( residential address)	if different to									
16 Phone number at the correspondence address										
Your UAE licensed financial send these documents to yo					all corresp	ondence r	elating to	your policy	and w	vill
Please tick here if you would to your policy to you.					all correspo	ndence re	lating			

Your details (continued)		
	First (or only) applicant	Second applicant
17 Are you to be a policyholder?	Yes No	Yes No
18 Are you to be a Life Assured?	Yes No	Yes No
19 Are you in good health? If <b>No</b> , please give details on a separate piece of paper. Please first refer to our Data Protection section on pages 14 and 15.	Yes No	Yes No
	If the applicants are not to be the Lives Assi 'Additional Lives Assured/Policyholders' mu Life Assured.	ured, the supplementary application form st be completed. There must be at least one
Politically exposed person		
their close family members and their close as	ember of the judiciary, diplomatic service office	
1 Are you, any of your family members or ar		Yes No
If Yes, please provide the following details	and complete the supplementary Source of W	/ealth Form.
2 Surname		
3 Forename(s)		
4 Position held as PEP		
5 Country position held		
6 Date position held From	То	
7 If the PEP is a family member or close associate, please confirm the relationship		
Number of policy segments		
Please specify how many individual policies you wish your Reserve+ policy to be issued in.	and the are requ	nimum number of individual policies is 1 maximum is 100. If more than 100 policies aired please contact us. If left blank, 100 will be issued.
Total premium		
I wish to pay:		
Sterling (GBP) US dollars (USD)	Euro (EUR) Australian dollars (AUD)	Amount
Discretionary: GE Part Discretionary: GE	BP 75,000 USD 112,500 EUR 112,500 AU BP 150,000 USD 225,000 EUR 225,000 AU	D 75,000 D 225,000 D 450,000 D 15,000

**Note:** When investing monies, please indicate your chosen investments in **Investment instructions** on page 10.

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Policy currency					
Please select the currency in which you wish your Reserve+ policy to be denominated (this will be the currency in which your policy is valued, and total payment figure calculated).					
Sterling (GBP)	US dollars (USD) Euro (EUF	R) Australian dollars (AUD)			
Payment metho	ds				
If you are paying by p	personal cheque or electronic transfer,	please tick the appropriate box and fol	low the instructions.		
By electronic transf		se note the bank details listed in the ta own bank to set up an electronic trans			
By personal cheque	Pleas	se make cheques payable to <b>Friends P</b>	rovident International Limited.		
I have arranged for t Friends Provident Int	he payment to be made <b>electronicall</b> y ernational Limited.	y and I have provided evidence of the	payment arrangement to		
If remit	ting through a bank account in the l	Jnited Arab Emirates, please note b	ank details listed below		
Policy currency	USD	GBP	EUR/AUD		
Bank	HSBC	HSBC	Isle of Man Bank Limited		
Postal Address	PO Box 66, Dubai, UAE	PO Box 66, Dubai, UAE	East Region, Douglas, Isle of Man		
Account Name	Friends Provident International Limited	Friends Provident International Limited	Friends Provident International Limited		
<b>Account Number</b>	025171067214	025171067213	954540038965		
IBAN	AE680200000025171067214	AE950200000025171067213	GB86RBOS60954540038965		
SWIFT/BIC Code	BBMEAEAD	BBMEAEAD	RBOSIMD2		
Sort Code	N/A	N/A	60-95-45		
If remitting through a bank account in the UK/Channel islands/Isle of Man /Others, please note bank details listed below					
Policy currency	USD/GBP/EUR/AUD (Multi-currency)				
Bank	Isle of Man Bank Limited				
Postal Address	East Region, Douglas, Isle of Man				
<b>Account Name</b>	Friends Provident International Limited				
<b>Account Number</b>	954540038965				
IBAN	GB86RBOS60954540038965				
SWIFT/BIC Code	RBOS	SIMD2			
Sort Code	60-95-45				

### Payment methods (continued) Source of payment I confirm that the cost of electronic transfer is to be paid for by debit of funds from my personal bank account. The details of this account are: Sort code (if applicable) SWIFT/BIC code (if applicable) IBAN (if applicable) Account number Account name Bank name Bank address **Optional withdrawals** Applicants may choose to receive a regular payment from their policy. The current minimum individual withdrawal is USD 375 (or GBP 250; EUR 375; AUD 750). The level of withdrawals may be varied or stopped altogether by giving us written notice. No assets will be sold to meet regular withdrawals without instructions. Regular withdrawals must be funded by either available cash in the General Transaction Account or by the provision of a dealing instruction which can be downloaded from our website. Failure to ensure available funds could result in delays with regular withdrawal payments. Withdrawal instructions Note that we dispatch payments either on the 1st or 14th of the month — please indicate the date you prefer in the appropriate box below. GBP USD Other I wish to receive Amount Monthly Quarterly Payable (tick one box only) Half-yearly Yearly 14th Commencing (tick the date which applies) of (month) (year) I request Friends Provident International Limited (Friends Provident International) to pay the benefits by electronic transfer. Please transfer the benefits into my account (must be policyholder's account). Sort code (if applicable) SWIFT/BIC code (if applicable) IBAN (if applicable) Account number Account name Bank name Bank address

#### Source of funds

#### **SOURCE OF FUNDS DETAILS**

The Isle of Man Financial Services Authority requires all Isle of Man life companies to make enquiries as to how an applicant has acquired the monies to be used as payment for their plan. This reflects the Isle of Man's commitment to maintain the highest possible standards of business practice and to counter money laundering and the financing of terrorism.

Friends Provident International has adopted a risk-based approach to meet these regulations, categorising our products and countries that we will accept business from into Standard or Higher risk. We have categorised countries according to their level of compliance with international regulatory standards.

Full details of the source of funds procedures can be obtained from your financial adviser or can be downloaded from https://advisers.fpinternational.com/documents/source-of-funds.pdf.

You must complete the following details below in all cases and for both applicants as applicable.

	Applicant 1	Applicant 2
Annual salary plus bonuses		
1 Annual salary this year (include currency)		
2 Bonuses this year (include currency)		
3 Annual income last year (include currency)		
4 Bonuses last year (include currency)		
5 Occupation		
6 Employer's company name		
7 Nature of business		
If you are retired, please tell us your previous	us occupation, salary, employer and date of ref	tirement.
8 Previous occupation		
9 Salary (include currency)		
10 Employer's company name		
11 Date retired (DD/MM/YYYY)		
Other unearned income		
12 Amount received (include currency)		
13 Received from		
14 Date received (DD/MM/YYYY)		
Where your source of funds for this applicatio	n is from any of the following, please provide d	letails.
Savings		
15 Amount received (include currency)		
16 Bank where savings held		
17 How and for how long were the savings accumulated?		

necessary.

# Source of funds (continued) **Applicant 1 Applicant 2** Pension transfer 18 Amount received (include currency) 19 Received from 20 Date received (DD/MM/YYYY) Property or asset sale 21 Amount received (include currency) 22 Address of property sold or asset type 23 How long held 24 Date of sale (DD/MM/YYYY) **Company profits** 25 Profits this year (include currency) 26 Profits last year (include currency) 27 Industry Company sale 28 Amount received (include currency) 29 Company name 30 Company industry 31 Date received (DD/MM/YYYY) Other such as maturing investment, lottery or betting win, gift or inheritance (for inheritance, please state from who, for maturing investment please confirm how long held). 32 Amount received (include currency) 33 Source 34 Date received (DD/MM/YYYY) Friends Provident International reserves the right to request further documentary evidence of source of funds should it be considered

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#### **Valuations**

Please register on Friends Provident International Limited's Portal on our website to access your Quarterly Bond Valuations online.

In addition, I understand that quarterly valuations will be sent to me by email to the email address provided on page 4, and a copy sent to my UAE licensed financial adviser.

I understand that trade contract notes will also be sent to me by email.

(All emails will be encrypted using WINZIP software and a PDF reader will be required. A password will be sent to you directly to access this file.)

#### **Investment instructions**

If you would like us to place the investments within Reserve+, and for our appointed custodian to hold them, please state your chosen investments below. If you are using the services of a Discretionary Fund Manager, external custodian or fund platform, please leave blank. If there is insufficient space, please use a separate sheet, signed by all applicants. Charges will be deducted from your General Transaction Account; therefore, if an overdrawn balance is to be avoided, please ensure sufficient cash is retained in line with your investment strategy.

Currency	Units Shares/Bonds/ Cash amount	SEDOL/ISIN (essential) <sup>†</sup>	Full security/fund name description

† If no SEDOL or ISIN is provided, Friends Provident International Limited accepts no liability for any errors in the funds selected.

if no SEDOE of 13 in is provided, Friends Frovident international Elimited accepts no hability for any errors in the funds selected.				
Your investment options				
Investment adviser (go to page 21)		Please complete this section if you would like your adviser to have authority with respect to the investments.		
Discretionary Fund Manager (go to page 23)		Please complete this section if you would like to appoint a Discretionary Fund Manager for your investments.		
Asset exchange scheme (go to page 25)		Please complete this section if you wish to transfer an existing asset(s) into your new Reserve+.		

Please complete this section if you are United Arab Emirates (UAE) resident or, if you are not UAE-resident, you are signing this application form in the UAE. This information is mandatory and your application cannot be processed without it.

	Financial circumstances				
		First (or only) a	pplicant	Second app	olicant
1	Please state net annual income for last 3		]		
	Year 1	Currency	Amount	Currency	Amount
	Year 2	Currency	Amount	Currency	Amount
	Year 3	Currency	Amount	Currency	Amount
2	Please state details of assets held.				
	Cash in bank	Currency	Amount	Currency	Amount
	Value of shares and equities	Currency	Amount	Currency	Amount
	Property value	Currency	Amount	Currency	Amount
	Other investments	Currency	Amount	Currency	Amount
3	Please state details of liabilities held.				
	Outstanding loans to be paid issued by banks	Currency	Amount	Currency	Amount
	Outstanding balance to be paid on other loans	Currency	Amount	Currency	Amount
	Outstanding balance to be paid on credit cards	Currency	Amount	Currency	Amount
4	Please detail below the names of the ba (Please continue on a separate sheet, if		address, where you hold	accounts	
	Bank name				
	Bank address				
5	Please detail other insurance policies he	eld. (Please contir	nue on a separate sheet, i	if necessary).	
	Policy number				
	Provider				
	Premium amount per year	Currency	Amount	Currency	Amount
	Status (paying, cashed-in, paid up)				

Friends Provident International Limited will require you to declare that you meet the criteria for a Non-Retail investor if you or your adviser wish to trade what FPI considers to be Non-Retail assets in your Reserve+.

#### Important notes

- 1 A copy of this application form and the documents submitted with your application will be provided to you with your policy documents. These are important and valuable documents and it is likely that you will need to refer to them in future. You are advised to keep them together with the policy documents and any further correspondence relating to your policy in a safe place.
- 2 You should seek guidance from your UAE licensed financial adviser as to the suitability of the policy to your own particular circumstances. Reserve+ should be regarded as a medium to long-term investment (five years or more).
- 3 Insurance is a contract of utmost good faith and you are to disclose in this application form, fully and faithfully, all facts which you know or ought reasonably to know. If a material fact is not disclosed in this application, or you misrepresent any material fact, any policy issued may be void and all or part of any claim may not be paid. A fact or circumstance is "material" if it would influence the judgement of a prudent insurer in determining the premium or determining whether the insurer will accept your application and, if so, the terms upon which it is accepted. If you are in doubt as to whether a fact is material, you are advised to disclose it.

  Please check to ensure that you are fully satisfied with the information declared in this application. By signing this application form, you confirm that the information which has been entered in this application is complete and accurate and that such information was entered by you or by a third party with your knowledge and approval.
- 4 Each policy is governed by and shall be construed in accordance with the laws of the United Arab Emirates.
- 5 Once your application has been processed, you will receive a copy of your policy conditions, along with your personal policy schedule(s). Please ensure you read this document in full during the 'cooling off' period (see Cancellation Rights in Section 1 on page 14 for more details) and that you retain any documents and/or correspondence received from us.
  - Important: Please be aware that the policy conditions sent with your policy schedule(s) will be the ones that apply to your policies; therefore, these documents should be kept safe.
- 6 Investment acknowledgement

Reserve+ gives you an investment choice from a very wide-ranging menu of investments. Some of the funds which are available to you are considered by FPI to be Non-Retail funds aimed at Non-Retail investors.

If you were investing in such a fund directly yourself, rather than through your Reserve+ policy, you may have to declare that:

- You have read and understood the information supplied to you and understand the nature of any risks involved.
- You have discussed with your independent UAE licensed financial adviser whether such an asset is appropriate for your investment portfolio.
- You are eligible and able to invest into the fund and have the level of investment knowledge and experience required by the fund manager.
- You meet certain minimum financial requirements.

Please note that different jurisdictions may impose different criteria on the generally accepted definition of a Non-Retail investor. Full definitions, restrictions and investor requirements can be found in each fund's prospectus/terms and conditions, which are available from the fund manager or your UAE licensed financial adviser. We require that you obtain, read and fully understand a copy of the prospectus/terms and conditions for your chosen investment(s) and have received specialist advice relating to the suitability of Reserve+ and the investment choices detailed within this form.

From	(adviser name)
of	(firm)
at	(location)

#### 7. Liquidity information

Some funds may have restrictions on their ability to pay redemptions due to the type of underlying investments they hold. This could limit your ability to raise cash from the fund in the future. Investment into Non-Retail funds should be considered a medium-to-long-term investment. You, in conjunction with your UAE licensed financial adviser, should consider whether Reserve+ is a suitable investment vehicle if it is likely that you will need access to your capital quickly in the future.

#### **Declarations**

Your attention is drawn to the following declarations. Where we have asked for information that we need to assess before we can accept your application, you must disclose all material facts. Such facts are those which an insurer would regard as likely to influence the assessment and acceptance of a proposal. If you are in doubt as to the relevance of any particular information you should disclose it, as failure to do so could result in you being quoted the wrong terms, a claim being rejected or reduced, or the Reserve+ policy being invalid.

#### 1 Investment declarations

Before you invest in any assets through a Reserve+ policy, we want to ensure that you are aware of the nature and possible risks associated with them. Would you therefore please make the following declarations:

- a) I understand that I may choose the investments to which my Reserve+ policy is to be linked.
- b) I acknowledge that it is my responsibility to ensure that the policy and/or underlying assets is suitable for my investment needs/objectives and/or attitude to risk and I confirm I will seek specialist financial advice, where necessary.
- c) I confirm that I understand it is my decision as to whether the policy (as well as the underlying investments) is suitable for my needs.
- d) If I choose to invest in assets aimed at a Non-Retail Investor, I acknowledge that it is my responsibility to obtain, read and understand the fund prospectus or equivalent offering documents, as appropriate.
- e) I acknowledge that Friends Provident International Limited is not responsible for the investment performance or any loss suffered or reduction in the value of my Reserve+ policy, arising from my chosen investment. Friends Provident International Limited does not have any responsibility for the investment management of the assets within my Reserve+ policy and Friends Provident International Limited does not approve any asset as a suitable investment.
- f) I acknowledge that Friends Provident International Limited reserves the right to reject any asset, for example if certain administration criteria are not met.
- g) I acknowledge that the purchase of my investments may be delayed if Friends Provident International Limited requires a signed declaration in respect of my chosen investments.
- h) I acknowledge that my investments are processed according to the terms and conditions of the relevant institution that cash is being invested with.
- i) I acknowledge that specific investor protection and compensation schemes that may exist in relation to collective investments and deposit accounts are unlikely to apply in the event of failure of such an investment held within insurance policies.
- j) I agree that Friends Provident International Limited shall not be responsible for any loss or liability to the Reserve+ policy as a result any of the actions or failure to take action on my part relating to investment decisions which gives rise to any loss in value to the Reserve+ policy. I promise to repay to or reimburse Friends Provident International Limited in respect of any legal proceedings, claims, costs, expenses (including legal expenses) actions or demand against Friends Provident International Limited arising from a breach of this clause.
- k) I acknowledge that some of the investments available may be considered by FPI to be Non-Retail assets, and I realise that these types of investment are not intended for general sale to Retail Investors.
- l) I am aware that Friends Provident International Limited will be regarded by the asset manager as the investor for the purposes of investment.
- m) I accept that some investments involve a high level of risk and that it is my responsibility to read the investment documentation, including any risk warnings, provided by the investment manager.
- n) I have discussed with my independent UAE licensed financial adviser whether such an asset is appropriate for my investment portfolio.
- o) I accept that Friends Provident International Limited requires me to confirm that I have read and understood the investment documentation and risk warnings for any asset I choose to invest in.
- p) For investment into Non-Retail assets, I acknowledge that Friends Provident International Limited will require me to sign an additional declaration confirming that I gualify and meet the required standards to be able to invest.
- q) I am aware that the declaration must be signed before Friends Provident International Limited can place the investment and, in all cases, Friends Provident International Limited has the right to decline the investment without providing a reason.
- r) I acknowledge that in the event of any premium tax or withholding tax being levied in my country of residence, it will be my responsibility to increase the payment by an appropriate amount or to settle the liability directly with the relevant tax authorities.

#### **Declarations (continued)**

#### 2 General declarations

I declare that this application was signed in	(country)
and the advice was received in	(country)

I further declare that all the information provided in this application form, including this declaration, has been entered by myself or with my knowledge and that the signature placed on the application is my signature. I also declare that all information provided herewith are complete and true to the best of my knowledge and belief. I agree that they, together with any other statements made to a medical examiner in the event of a medical examination or to Friends Provident International Limited, now or in the future, shall form the basis of the policy under the law of the United Arab Emirates. I have received, read and have been given an explanation of all the printed materials relevant to this policy and we have been acquainted with the management charges made by Friends Provident International Limited.

I further declare that I understand and agree that the policy shall not become effective until it is issued with the premium paid in full and all requirements have been met.

I understand that this application can only be accepted by employees of Friends Provident International Limited situated at Friends Provident International Limited's head office in the Isle of Man and that no other employees or third parties have the necessary authority to create a binding contract.

I am aware that tax evasion is a criminal offence and I will not use this policy to evade tax. I understand that Friends Provident International Limited has statutory obligations to report suspicions of criminal wrongdoing including tax evasion to law enforcement agencies or other relevant authorities in the locations where it operates. I am responsible for my own tax affairs and I hereby declare that I understand my personal tax obligations and responsibilities and I have complied with all legal requirements to make declarations to tax authorities and pay the tax that I owe. As appropriate and necessary I have taken, or will take, legal advice in relation to my tax affairs and in particular, my tax obligations as they apply to this application.

I understand that the Isle of Man Government has and will be entering into a number of inter-governmental agreements to share tax information, where applicable, with the tax authorities in other territories. I understand that there is a requirement to collect information about customers' tax residence and nationality as part of Isle of Man legislation and that as a financial services company Friends Provident International Limited is legally obliged to collect it. I am aware that Friends Provident International Limited is required to request an entity's tax residency and tax identification number/global intermediary identification number (where applicable) and, where controlling persons are potentially reportable their tax residency, tax identification number (where applicable) and nationality and will record this information.

I understand that for reportable controlling persons, the information that will be reported to the Isle of Man Government is:

- The controlling person's name, address, jurisdiction of tax residence, tax identification number and date of birth.
- The Friends Provident International Limited policy number.
- The balance or value of the account at the end of the calendar year or at the date the policy was cashed in.
- The sum of any withdrawals taken within the relevant reporting year.

The terms of the policy and the declarations in this application form that are in purple font describe circumstances in which We will be exempt from liability under the policy or which may lead to nullification or avoidance of the policy or a limitation of your right(s) as policyholder. By signing below you confirm that you have read, understood and accepted the terms and conditions of the policy and the declarations in full and agree not to rely on any law or regulation or other grounds to argue to the contrary.

#### 3 Cancellation rights

You can cancel your policy within 30 days from the day you receive notice from us of your cancellation rights and all contractual documents. These will be sent to you once your policy has been set up. If you exercise this right to cancel your policy, we will refund your premium, adjusted only to reflect the amount of any increase or decrease in the value of your policy's investments from any market movements in the interim. If you wish to cancel you should follow the instructions in the notice from us of your cancellation rights. Upon cancellation, the policy will terminate immediately.

A separate cancellation right of 30 days will apply to any subsequent premium(s) in relation to that new premium only.

#### 4 Data protection

Please read this privacy notice carefully. Please be aware that this is a short version of our privacy policy and you should visit www.fpinternational.com/legal/privacy-and-cookies to view the full policy.

Friends Provident International Limited ("FPI") is the controller of your personal data processed in connection with this application and product. The data which we process is that which you provide in this form such as your names, contact details and information about medical history. As well as obtaining data directly from yourself, we may obtain additional information from your doctor(s) as further described in this application form.

#### **Declarations (continued)**

#### 4 Data protection (continued)

We use your information to process and underwrite your application, administer your policy and handle any claims, to help detect and prevent fraudulent activity, and for customer profiling and marketing. We only retain your data for as long as is necessary for the maintenance of your contract, or for legal or regulatory requirements.

We may share your data with third parties who provide services to us, some of whom may be located outside of the Isle of Man, European Economic Area (EEA), or country in which your data was collected. In these cases we make sure that your data is protected to the same standards as in the Isle of Man, EEA, or country of data collection. We may also share your data with law enforcement and regulatory bodies, other insurers, your insurance intermediary and their service providers.

Data protection laws require us to tell you what legal basis we use for processing your personal data. In general, the processing is necessary to perform a contract with you, or to take steps requested by you before entering into this contract.

We will not normally carry out any direct marketing campaigns but if we do, we will always contact you first and give you the opportunity to opt in to direct marketing before any communications of this nature take place.

We may process data about you which the law considers to be sensitive, in particular health information. In this case, we base our processing on your freely given, informed, explicit consent or that the processing is necessary for the establishment, exercise or defence of legal claims. We may also process this type of data about other people you wish to insure such as family members. Please tell these people to read this privacy notice and our privacy policy so that they understand how Friends Provident International Limited may use their personal data.

#### By proceeding with this application:

- You understand that we will use information about you, including information about health, for the above purposes.
- You are confirming that any other person (eg a family member or other individual covered by your insurance policy, or whose information is relevant to use providing this policy coverage) whose information you are providing understands and has no concerns about their information being used in this way.

NOTE: If you have any concerns about use of information for these purposes, you should not proceed with this application as we may be unable to provide you with a policy. You can also contact us at any time if you would like to ask us to cease using your information, but this may result in your policy being cancelled.

You have various rights in relation to your personal data including accessing your data, and in some limited circumstances objecting to processing or having your data erased.

You can find out more information about how to exercise these rights and details of who to contact with queries on our privacy practices by viewing our full privacy policy available on our website **www.fpinternational.com/legal/privacy-and-cookies** or it can be provided upon request from our Data Protection Officer, Friends Provident International Limited, Royal Court, Castletown, Isle of Man, British Isles IM9 1RA.

By signing this form I consent to this use of my personal data.

#### 5 UAE licensed financial adviser

I acknowledge that Friends Provident International Limited and my UAE licensed financial adviser have entered into an agreement ('terms of business') which sets out the basis upon which Friends Provident International Limited is prepared to accept applications submitted by the UAE licensed financial adviser on my behalf. This agreement categorically states that the UAE licensed financial adviser acts as my agent, and not the agent of Friends Provident International Limited. I acknowledge that my UAE licensed financial adviser, or any other, has no authority to act as the agent of Friends Provident International Limited or to state, suggest or imply that they have such authority.

#### 6 Fees and commissions

I am aware that certain investments the UAE licensed financial adviser makes on my behalf from time to time may contain fees which exist partly to meet promotion and distribution expenses of the investment, including commission paid to my UAE licensed financial adviser. I understand that full details of any commissions paid in respect of certain investments held within the Reserve+ policy are available on request from my UAE licensed financial adviser.

7 I am aware that Reserve+ offers limited protection benefit.

	First (or only) applicant	Second applicant
Signature(s) of applicant(s)		
Name (block capitals)		
Date		

# Section 2: Appointment of third party as payee

In all cases, applicants should seek financial and legal advice regarding the implications of a particular arrangement or course of action. This is to ensure that use of this nomination is suitable for your personal circumstances taking account of the tax and legal provisions relevant to your jurisdiction of domicile and residence. Depending on your financial objectives, alternative arrangements, such as trusts, may be more suitable and we recommend you obtain appropriate advice.

#### To: Friends Provident International Limited

Subject to any future revocation or appointment, I hereby appoint the following person/persons as payee(s) in the share/shares indicated below.

		Proportion of benefit (must total 100%)
Surname of the payee(s)		%
First name		
Date of birth		
Relationship (if any)	Nationality	
Address		
Surname of the payee(s)		%
First name		
Date of birth		
Relationship (if any)	Nationality	
Address		
		0,1
Surname of the payee(s)		%
First name		
Date of birth		
Relationship (if any)	Nationality	
Address		
		0,1
Surname of the payee(s)		%
First name		
Date of birth		
Relationship (if any)	Nationality	
Address		

# Section 2: Appointment of third party as payee (continued)

Certified identification and verification of residential address for each beneficiary will be required at the time of the claim.

In the event that at the time of any payment you are unable to contact the payee(s), you should make enquiries of the following person(s)\* for the purposes of locating the payee(s).

Name of contact	
Address	
Telephone number	
If no contact name is given, this way be attached, if desired.	l not affect the validity of this appointment. Names and details of other contact persons
	e before signing this form or I have elected not to do so.
I also understand that the appointm	nt of payee(s) made on this form shall be revoked by any surrender, assignment or disposal of ny death I am survived by other persons named as the life assured on the policy schedule.
	and the appointment is made in accordance with the relevant provision of the policy The neaning given in the policy conditions.
All policyholders must sign.	
Signed	
Name (block capitals)	
Date	
Signed	
oigneu	
Name (block capitals)	
Date	

# Section 3: Investment restrictions

#### **Investment restrictions**

The following list details the assets permitted within Reserve+. It is important that you do not invest outside of these parameters. Each asset will be vetted on an individual basis against our criteria and we reserve the right to refuse any asset. Friends Provident International Limited is the beneficial owner of all of the assets held within the policy, which are held in Friends Provident International Limited's name.

#### Reserve+ allows you to invest in the following:

- equities and fixed-interest securities (including Corporate/Government/Sukuks) quoted on most recognised stock exchanges
- UK authorised unit trusts or overseas equivalent
- · open-ended investment companies
- · UK authorised investments trusts or an overseas equivalent
- UK real estate investment trusts or an overseas equivalent
- · hedge funds, funds of hedge funds and exchange-traded funds
- · cash, including bank and building society deposits.

#### In normal circumstances Friends Provident International Limited will not accept the following assets:

- shares in any company which is part of the group of companies of which Friends Provident International Limited is a member
- commodities
- real property
- futures and options
- · precious metals
- UK National Savings and investments products
- · US mutual funds, unless a fund is discretionary-managed
- Friends Provident International Limited mirror funds.

# Section 4: Appointment of investment adviser

Part A				
Reserve+ p	olicy number (if known)			
Name of in	vestment adviser company er')			
Address of the adviser				
Declaratio	n (In respect to Part A to Part D)			
accordance		pecifie	nvestment adviser of the underlying assed d on page 18. I request Friends Provident te this appointment.	
Authority (	granted			
-	adviser authority to act in the followed to your investment adviser).	wing ca	pacity (please read the three options care	efully before indicating the authority you
Please tick	one box only.			
Option 1:	Advisory basis only, my signed consent required		of the Reserve+ policy with me, and Friendly act upon investment instructions t	ny proposed alterations to the composition ends Provident International Limited will hat I, as policyholder(s), have signed. ed will not action any instructions that
Option 2:	Advisory basis only, without signed consent		of the Reserve+ policy with me, and ob are made. I authorise my adviser to su	
Option 3:	Delegated investment management		the boundaries of the investment restrict	out consulting me first, to make all ets, hold cash or other investments, within ctions detailed below. I authorise Friends t upon the investment instructions of the

I agree that Friends Provident International Limited shall not be responsible for any loss or liability to my Reserve+ policy, as a result of the actions or failure to take action, on the adviser's part or the part of any legal or natural person appointed by the adviser, which gives rise to any loss in value to my Reserve+ policy howsoever arising.

I and my estates promise to repay or reimburse Friends Provident International Limited in respect of all losses, damages, liabilities, actions, proceedings, claims, costs and expenses (including legal expenses) arising from the activities of the adviser and any other legal or natural person appointed by the adviser (including, but not limited to, the cost of defending in any court of law such claim, demand or action against Friends Provident International Limited and the cost of recovering the investments held by the adviser). I authorise Friends Provident International Limited to act upon this authority until I revoke this authority in writing.

# Section 4: Appointment of investment adviser (continued)

Part B								
Remuneration (please tick one box)								
I have agreed with the adviser that a fee will no	ot be paid.							
l authorise Friends Provident International Limited to make a withdrawal from the Reserve+ policy of:  USD GBP Other Amount a quarter								
% per annum of the fund value as an ongoing fee, up to a maximum of 1.5%, at the quarterly valuation point.								
% of the initial premium/top up paid as a one-time fee, up to a maximum of 2.5%, plus % per annum of the fund value as an ongoing fee, up to a maximum of 1.5%, at the quarterly valuation point.								
I understand that an amount equivalent to this my behalf.	withdrawal shall be payable by Friends Provi	dent International Limited to the adviser on						
Part C								
Investment restrictions I agree to the investment restrictions listed on p	page 18.							
Part D								
Fees and commissions I am aware that certain investments the adviser and distribution expenses of the investment, inclurespect of certain investments held within the Relacknowledge that the above fees and commiss any investment adviser fee taken under Part B.	uding commission paid to my adviser. I underst eserve+ policy are available on request from m	and that full details of any commissions paid in y adviser.						
Signature(s) of applicant(s)	First (or only) applicant	Second applicant						
Date								

### Section 4: Appointment of investment adviser (continued)

### Important note If you are licensed to provide financial services in one of the following jurisdictions, please complete Part E below. Australia, Canada, Gibraltar, Guernsey, IOM, Jersey, Mauritius, New Zealand, South Africa, Sweden, Taiwan, UK If you are not licensed in a country or jurisdiction listed above, please complete Part F. Declaration On behalf of the 'investment adviser' named in Section 3, Part A, I have read and understood the investment options and agree to act in accordance with them. The capacity in which I will act as investment adviser will be: Please tick one box only. Advisory basis only, (the Applicant(s) I confirm that I hold the appropriate authorisation to provide ongoing investment has/have selected Option 1 in Part A) advice to the Applicant(s). I understand that Friends Provident International Limited can only act upon investment instructions that have been signed by the Applicant(s). I confirm that I hold the appropriate authorisation to provide ongoing investment Advisory basis only, (the Applicant(s) has/have selected Option 2 in Part A) advice to the Applicant(s). I understand that I must obtain the Applicant(s) agreement to any investment advice given and that I may be asked to provide such agreement to Friends Provident International Limited if requested. Delegated Investment Management, I confirm that I hold the appropriate authorisation enabling me to provide investment instructions to Friends Provident International Limited, and that I have (the Applicant(s) has/have selected Option 3 in Part A) the agreement of the Applicant(s) to issue investment instructions on their behalf. Part E I confirm that I am licensed by a regulatory body located in one of the following jurisdictions: Australia, Canada, Gibraltar, Guernsey, IOM, Jersey, Mauritius, New Zealand, South Africa, Sweden, Taiwan, UK and I am required by my regulatory body to comply with legislation in accordance with (or equivalent to) the EU Money Laundering Directives. I am regulated by (name of regulatory body) My regulatory licence number is (country) I confirm that I will comply with all legal and regulatory requirements of the country where I am licensed to provide financial advice. I confirm that I will notify you of any changes to my authorisation including any disciplinary action taken against me.

Signature of adviser

Date

Name of adviser

For and on behalf of (name of firm)

Address of firm

Telephone number

Fax number

Email address

### Section 4: Appointment of investment adviser (continued)

#### Part F

### Identification requirements - notes

#### These notes apply only if Part F is completed.

The principal requirement is to look behind the corporate entity to identify those who have ultimate control over the business and company's assets. Where the shareholder is a holding company, trust or nominee, then Friends Provident International Limited is required to look behind this to the ultimate beneficial owner and verification of identity of the ultimate beneficial owner must be obtained, together with evidence demonstrating beneficial ownership.

Verification of the identity: this is deemed to comprise:

- Certified copy of the Certificate of Incorporation
- A list of all directors and certified ID & VOA for two, one of which must be an executive, (we will require full name, residential address and date of birth of each director).
- Evidence of the registered office address (if this is not the address on the application we require evidence that the address is being used and confirmation of why there is a difference).
- Confirmation that the company has not been, or is not in the process of being dissolved, struck off, wound up or terminated.
- A list of shareholders and certified ID and address verification for those holding 25% or more of the shares (we will require full name, residential address and date of birth for all shareholders).
- Further details as to additional verification information requirements will be provided by Friends Provident International Limited on a
  case-by-case basis, if required.

I understand that its principal regulator requires Friends Provident International Limited to complete an identification check on the investment adviser firm and I must provide identification requirements as in the above notes, if not previously provided, before this appointment of investment adviser form can be accepted.

On behalf of the 'investment adviser' named in Section 4 Part A, I have read and understood the investment options in Section 4 Part A. I confirm that I will comply with all legal and regulatory requirements applicable. I confirm that I will notify you of any changes to the company including any disciplinary action taken against me or the company.

Signature of adviser	
Date	
Name of adviser	
For and on behalf of (name of firm)	
Address of firm	
Telephone number	
Fax number	
Email address	

# Section 5: Appointment of Discretionary Fund Manager and custodian

Part A	
Reserve+ policy number (if known)	
Name of Discretionary Fund Manager ('the manager')	
Address of the manager	
Name of custodian ('the custodian')	
Address of the custodian	

- 1 I declare that I wish for the underlying assets held within my Reserve+ policy to be placed in a discretionary account, which will be managed on a discretionary basis by the manager. I further declare that I wish for the custodian or any other legal or natural person appointed by the custodian to hold safe custody of these assets.
- 2 I acknowledge that these investments are held in the name of Friends Provident International Limited and therefore it is necessary for Friends Provident International Limited to enter into formal agreements ('the agreement') appointing the manager and custodian. I acknowledge that Friends Provident International Limited may modify the agreement at its absolute discretion, for example, where the agreement allows for the provision of certain investments, which cannot be held within my Reserve+ policy.
- 3 I acknowledge that Friends Provident International Limited is only prepared to enter into the agreement as a result of my request to appoint the manager to manage the assets and for the custodian to hold safe custody of the assets.
- 4 I agree that Friends Provident International Limited shall not be responsible for any loss or liability to my Reserve+ policy, as a result of the actions, or failure to take action, on the manager's or custodian's part, or on the part of any legal or natural person appointed by the manager or custodian, which gives rise to any loss in value to my Reserve+ policy howsoever arising.
- 5 I and my estates promise to repay to or reimburse Friends Provident International Limited in respect of all losses, damages, liabilities, actions, proceedings, claims, costs and expenses (including legal expenses) arising from the activities of the manager or custodian and any legal or natural person appointed by the manager or custodian (including, but not limited to, the cost of defending in any court of law such claim, demand or action against Friends Provident International Limited and the cost of recovering the investments). I agree that if Friends Provident International Limited is obliged to pay any money to the manager or custodian or any legal or natural person appointed by the manager or custodian under the terms of the agreement, such money shall be deducted from my Reserve+ policy.
- 6 I acknowledge that Friends Provident International Limited may terminate the appointment.

Part B		
I acknowledge that the manager will deduct a fee of:	GBP USD EUR AUD Amount a qu	uarter
or	% a year	

of the value of the discretionary account at the quarterly valuation point, plus value added tax (VAT). I acknowledge that the provision of discretionary fund management services by UK and non-UK Discretionary Fund Managers is subject to VAT at the applicable UK rate. I agree that if Friends Provident International Limited is obliged to apply VAT for discretionary fund management services, such money shall be deducted from my Friends Provident International Limited policy.

I also acknowledge that other fees, including but not limited to buying and selling, safe custody and delivery charges will be deducted from the discretionary account, in accordance with the manager's and custodian's rates for such charges in force from time to time.

# Section 5: Appointment of Discretionary Fund Manager and custodian (continued)

#### Part C

			that Friends Provident International nary account in accordance with the								/ m	e, to maı	nage	e the ass	sets	cont	ained i	n the	
1	Investment criteria (for example,		· · · · · · · · · · · · · · · · · · ·																
			us, balanced, aggressive)																
2			: <b>riteria</b> (for example, low, m, high)																
3	lnv	vest	ment restrictions	I agree t	o t	he inve	estme	ent rest	riction	s listed	on	page 18	3.						
4	Na	me	d investor status	Retail				Non-F	Retail										
			sist with client classification, Friends below:	Provider	nt I	nterna	tiona	l Limite	ed's de	finition	is c	of a Retai	il an	d Non-F	Reta	ail inv	estor c	an be	9
	Re	tail	Investor:																
	ΑΙ	Reta	ail Investor is an investor who is not a	Non-Ret	ail	Investo	or.												
	No	n-F	Retail Investor:																
	1	Αc	overnment, governmental institution	s and aut	ho	rities, c	r the	compa	anies f	ully owi	nec	by any	of th	ne aforei	mer	ntione	ed.		
		_	ernational bodies and organizations.			•		•		,		, ,							
	3		person or entity licensed to engage in estments, including:	a comm	erc	ial bus	iness	, provic	led tha	it one c	of th	ne purpo	ses	of its bu	ısine	ess is	manag	ging	
		a)	A person, body corporate, partnersh activity includes acquiring, underwriadvice about investments;																ing
		b)	Any director or partner of or consult	tant to a p	er	son ref	erred	l to in p	aragra	ph (a);									
		c)	A functionary to a professional inves	stment ve	hic	cle or a	n ass	ociate	of a fu	nctiona	ary	to a prof	fessi	onal inv	estr	nent	vehicle	e;	
		d)	An employee, director or shareholde remuneration or an incentive arrang							vho is a	acq	uiring the	e inv	estmen	t as	part	of his		
		e)	A trustee of a family trust settled by	or for the	e b	enefit (	of one	e or mo	re per	sons re	efer	red to in	par	agraphs	(c)	or (d	);		
	f) A trustee or operator of any employment benefit or executive incentive scheme or trust established for the benefit of persons referred to in paragraphs (c) or (d) or their dependents;																		
		g)	A government, local authority, public	c authorit	ус	or supra	a-nati	onal b	ody in	the Isle	of	Man or e	else	where.					
	4		atural person who declares that thei in home, exceeds £1,000,000.	r annual i	nc	ome is	not le	ess tha	n £250	),000, d	or t	heir net (	equi	ty, with	the	exce	ption o	f thei	r
			ition all managers will be issued with y clients depending on their status a							nedule,	wh	ich will il	llust	rate whi	ich :	asset	types	can b	е
				First (or	or	nly) app	olicar	nt				Second	app	olicant					
Siç	jna	ture	e(s) of applicant(s)																
Da	te				1				1				7						7
-0				1 1	1		1		1	1 1		1 1	1 1		- 1	1 1			1

# Section 6: Asset exchange scheme

This section must be completed if an existing asset/share portfolio is to be transferred into a new policy. A power of attorney is included to enable the transfer on your behalf if you wish (not suitable for use by trustees, certain Jersey-based securities or for US securities).

The authority for asset exchange, which includes a power of attorney, is intended, once signed, to be a legally binding document. Consequently, it is essential that a number of formalities are complied with. We have set out below what we believe to be the matters which will apply to every case. There may however be other issues which apply because of your circumstances or the laws of the country in which you sign the document, and we would therefore suggest that if you have any queries you seek professional advice. The power of attorney included within this form is granted to Friends Provident International Limited.

#### Guidance notes to assist you to complete the form

- 1 The document must be signed in ink by every person who is a registered holder of any of the assets listed in point 8 on page 26, in the presence of a witness.
- 2 The witness must sign the document in ink and should give his or her full name, address and occupation.
- 3 Each signature must be witnessed separately. If the same person witnesses more than one signature, the witness must give the details in respect of each signature.
- 4 If there are any alterations or changes to the document, each one should be initialled (in the margin) by all signatories and all witnesses.
- 5 If it is necessary to use any supplementary sheets, these should also be signed by all signatories and witnesses, and dated.

#### Authority for asset exchange

1 As the registered owner(s) of the assets listed below ('the assets'), I (name)

in connection with my application for a Reserve+ policy hereby irrevocably authorise Friends Provident International Limited and Citibank\*\* (as Friends Provident International Limited's appointed nominee/custodian):

- a) To enter in the schedule printed after this authority the current holdings of assets represented by the certificates listed below.
- b) To transfer any or all of these funds to the relevant managers on my behalf at its absolute discretion and to account to me for the full value of the transfer.
- c) To transfer any or all of these securities on my behalf at its absolute discretion.

  \*\*Citibank may also operate under the name VIDACOS, and/or Fundsettle.
- 2 I understand that the exchange of these assets/shares may result in a capital gains tax liability, depending on my country of residence, and I further understand that no allowance will be made for the discharge of this liability, which I shall have to meet from other sources.
- 3 I understand that any transfers effected under 1 b) or c) above will normally take place as soon as possible following receipt of this completed authority, the relevant share certificates and/or other documents of title and signed application form(s).
- 4 I undertake that I shall account to Friends Provident International Limited for all dividends, interest or other rights or benefits received or receivable by me and to which the purchaser or transferee of the said assets is entitled, and to ensure that such purchaser or transferee shall be entitled to exercise all rights, whether voting or otherwise, in respect of the said assets.
- 5 Power of attorney †

For the purpose of carrying the foregoing into effect I hereby appoint Friends Provident International Limited and Citibank (as Friends Provident International Limited's appointed nominee/custodian) as my attorney on my behalf to execute or sign any such deed, transfer or other document as may be required for carrying into effect any of the transfers or other matters authorised hereunder in the same manner and as fully and effectively in all respects as I could do if personally present.

† N.B. This authority is not suitable for use by trustees, or for certain Jersey-based securities, or for US Securities.

#### Please provide a signed cover letter from the trustees.

- 6 I hereby undertake to ratify everything that Friends Provident International Limited shall do or purport to do under the said power and upon request, to sign and return to Friends Provident International Limited forthwith, all documents necessary to effect such transfers. I hereby confirm that I have all the necessary power and authority to transfer the assets and that none of them is subject to any lien, charge or encumbrance or third party rights. I confirm that I am not a director (or closely related to a director) of or employed by a company which has issued any of the assets nor of a subsidiary (as defined in Section 154 of the United Kingdom Companies Act 1948) of such company. I promise to repay to or reimburse Friends Provident International Limited in respect of all losses, damages, liabilities, actions, proceedings, claims, costs and expenses (including legal expenses) arising from or in connection with this authority.
- 7 I understand that for the purpose of the asset exchange scheme I am an execution only customer of Friends Provident International Limited (within the context 'execution only' means that advice is not sought by the applicant or given to the applicant by Friends Provident International Limited in relation to the transfer of these assets).

# Section 6: Asset exchange scheme (continued)

Source of funds

	monies used to acquire the dwere initially accumulated	
	a word initially addurnated	
How long have you held Or, if the assets are held wrapper/product, how has that been held?	d through an investment	
Additional supporting of		f the asset (or product/wrapper) has been held for less than two years and country of residence. Please refer to the premium limits table published on
	y case is reviewed on a case be ere it is felt that this may be w	y case basis, therefore we reserve the right to request additional information
8 Provisional list of as	sets for exchange (Note: minim tract details for all assets show	um value GBP 5,000 per asset). Please enclose relevant certificates, up to date n. (If there is insufficient space, please continue on a separate sheet of paper,
Bonds/number of shares/units to be exchanged	SEDOL/SIN (essential)	Full name of asset
		]

N.B. If you previously enjoyed special concessions in respect of any of the assets intended for exchange and listed above, these will cease when the exchange takes place. Dividends will be requested as cash.

# Section 6: Asset exchange scheme (continued)

#### **Important notes**

- 9 I hereby request the transfer of the assets listed above on the terms set out in this asset exchange authority.
- a) This form must be signed by every person who is a registered holder of any of the assets listed in point 8 on page 26.
- b) The form must also be signed by a witness.
- c) List the funds you wish to transfer into your Reserve+ policy. Each fund **must** have a **minimum value of GBP 5,000** or the equivalent in other currencies.
- d) The stock transfer forms may be sent to HMRC Stamp Duty Office. When they are received back from HMRC (this can take several weeks) the following documents are sent to the registrars for re-registration:
  - i) Stock transfer form
  - ii) Certificate
  - iii) Certified true copies of the power of attorney and form of authority for fund transfer. Confirmation should then be issued by the registrar that the stock is registered into the nominee name of Citibank (as Friends Provident International Limited's appointed nominee/custodian), and sent to us for retention.

#### Signed as a deed and delivered

	Signature		Signature
Signatures			
Date	Dated this day of	20	Dated this day of 20
Full name			
In the presence of	Signature		Signature
Signatures	Signature		Signature
Date	Dated this day of	20	Dated this day of 20
Full name			
Address			
Occupation capacity <sup>†</sup>			

- $^{\dagger}$  If a Jersey stock is included in the schedule, the witness must be one of the following:
- · a notary public
- a judge
- · a justice of the peace
- a magistrate
- the mayor or chief officer of any city or municipal corporation
- · a commissioner authorised to take oaths or affidavits
- a barrister
- a Solicitor of the Senior Courts of England and Wales
- the British Consulate consul or vice-consul (or a person for the time being discharging the duties of any such officer) in any foreign country.

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# Section 6: Asset exchange scheme (continued)

The following section is to be completed by the adviser. Failure to do so could result in delays to the transfer process.

10 In order for us to arrange delivery of the hol	ldings in a timely manner, please provide the fo	llowing:
Up-to-date statement of holdings		
• ISIN or applicable identifier code for each h	olding	
<ul> <li>How are the client's holdings currently held</li> </ul>	?	
In the client's own name		
Through a counterparty/		
other service provider		
Contract details	and the second s	
Registrar – The company responsible for the	ne upkeep of a company's register	
Name		
Address		
Telephone number		
Email address		
Email address		
Fund manager – The company responsible	for the administration of a particular fund.	
Tana manage.	To the daministration of a particular rana.	
Name		
Address		
Address		
Telephone number		
Totophone namber		
Email address		
Counterparty – A service provider, offering	investment services.	
Name		
Name		
Address		
Telephone number		
Email address		
Re-registration details for		
the necessary parties, for each of the holdings (available		
registrar/fund manager/		
counterparty)		

**Please note** – the settlement period of transfers may vary significantly, as once our instruction is in place there is reliance upon third party administrators to complete the process. Any charges requested by third parties to enact a transfer will be passed on to you.

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# What you need to provide

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

#### Verification of identity - must be provided for all applicants.

Please send a **suitably certified copy** of your passport, national identity card or drivers licence showing your photograph(s) and signature – if you are unable to provide either of these pieces please provide a reason why and contact us to discuss other acceptable documents before sending in your application.

Applicant 1	Applicant 2
I have provided identification (please tick to confirm)	I have provided identification (please tick to confirm)
If you are unable to provide ID please confirm why below:	If you are unable to provide ID please confirm why below:

#### Verification of current residential address - must be provided for all applicants

Please send a **suitably certified copy** of at least one of the following documents for each applicant. If you are unable to provide any of the documents listed below, please complete our confirmation of residential address form to provide us with reasons why no documents are available. The document will guide you on what further documents can be obtained https://advisers.fpinternational.com/documents/SERV05-Confirmation-of-residential-address.pdf

Applicant 1 (please tick which documents you have sent us)	Applicant 2 (please tick which documents you have sent us)	Type of document	Conditions
		A recent account statement from a regulated bank, building society or credit card company	The document must be no more than 6 months old If the statement or bill has been issued electronically, it must clearly show the address of your property
		A recent mortgage statement from a regulated lender	
		A recent rates, council tax or utility bill (mobile phone bills are not acceptable)	
		Correspondence from a central or local government agency	The document should be no more than 6 months old, or the most recent version where issued annually
		A photographic driving licence	The document must be in date and valid The same document cannot be used to evidence your identity
		A photographic national identity card	
		A full tenancy agreement	The agreement must be in date The agreement must be signed by all parties
		Proof of ownership of your property, such as lawyer's confirmation of a property purchase or a legal document recognising title to the property	The document must be signed by all appropriate parties

Please refer to our identity and address verification guidelines for further information on who can suitably certify your documentation https://advisers.fpinternational.sg/documents/id01-id-and-address-verification-guidelines-individuals.pdf

### **Further information**

Any references to 'we', 'us' and 'our', refer to Friends Provident International Limited. Friends Provident International is a business name for Friends Provident International Limited. The information given in this document is based on the understanding of Friends Provident International Limited of current laws, regulatory requirements and taxation practice in the United Arab Emirates and Isle of Man, as at November 2022, which may change in the future. No liability can be accepted for any personal tax consequences of this policy or for the effect of future tax or legislative changes. We do not condone tax evasion and our products and services may not be used for evading your tax liabilities.

Investment involves risk. Past performance should not be viewed as a reliable guide of future performance. Fund prices may go up and down depending upon underlying investment performance, and the value of your investment cannot be guaranteed. Investments held within a fund may not be denominated in the currency of that fund and the value of those assets can go up and down simply because of movements in currency exchange rates. All fund performance is quoted net of annual charges.

All policyholders are protected by the Life Assurance (Compensation of Policyholders) Regulation 1991 of the Isle of Man, wherever their place of residence. Applicants should be aware that specific investor protection and compensation schemes that may exist in relation to collective investments and deposit accounts are unlikely to apply in the event of failure of such an investment held within insurance policies.

Complaints we cannot settle can be referred to the UAE Insurance Authority. You can contact the UAE Insurance Authority at Aldar HQ, Al Raha beach, Abu Dhabi. Alternatively. your complaint can be referred to the Financial Services Ombudsman Scheme for the Isle of Man.

Some telephone communications with Friends Provident International Limited are recorded and may be randomly monitored.

Each policy is governed by and shall be construed in accordance with the law of the United Arab Emirates. If you effect a policy whilst resident in the United Arab Emirates, all disputes regarding your investment will be subject to the jurisdiction of the courts of the United Arab Emirates.

Friends Provident International Limited: Registered and Head Office: Royal Court, Castletown, Isle of Man, British Isles, IM9 1RA. Isle of Man incorporated company number 11494C. Authorised and regulated by the Isle of Man Financial Services Authority. Provider of life assurance and investment products. **Dubai branch**: PO Box 215113, Emaar Square, Building 6, Floor 5, Dubai, United Arab Emirates. Registered in the United Arab Emirates (UAE) with the Central Bank of the UAE as an insurance company. Registration date, 18 April 2007 (Registration No. 76). Registered with the Ministry of Economy as a foreign company to conduct life assurance and funds accumulation operations (Registration No. 2013). Friends Provident International is a registered trademark and trading name of Friends Provident International Limited.