

Additional single premium (top-up) unit linked products

For single premium products only.

This application form is only for use with the following products. Please tick the relevant box for your product and give the policy number.

Elite	<input type="checkbox"/>	Policy number	<input type="text"/>
International Investment Account	<input type="checkbox"/>	Policy number	<input type="text"/>
Summit	<input type="checkbox"/>	Policy number	<input type="text"/>
Zenith	<input type="checkbox"/>	Policy number	<input type="text"/>
Other	<input type="checkbox"/>	Policy number	<input type="text"/>

Financial adviser details

Company name	<input type="text"/>
Friends Provident International agency number	<input type="text"/>

Contact details for acknowledgement/queries on the application.

Contact name	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>

Details of Policyholder(s)

	Plan Owner 1	Plan Owner 2
1 Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>
2 Surname (as shown on passport/ID card)	<input type="text"/>	<input type="text"/>
3 First name(s) (as shown on passport/ID card)	<input type="text"/>	<input type="text"/>
4 Country of residence for tax purposes	<input type="text"/>	<input type="text"/>
5 Tax Identification Number (TIN)? If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, Resident Registration Number).	<input type="text"/>	<input type="text"/>
6 Are you a Specified US Person?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>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.</p> <p>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).</p> <p>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. FPI 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 for the country in which you have obtained new citizenship.</p>		
7 Do you want to update your contact/address details as part of this application?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
8 Additional information	<input style="width: 100%; height: 100%;" type="text"/>	

Payment details

I wish to pay GBP EUR USD Other Amount

Additional single premium (top up) unit linked products - Minimum premiums

Elite		International Investment Account		Summit		Zenith	
Currency	Amount	Currency	Amount	Currency	Amount	Currency	Amount
GBP	20,000	GBP	5,000	GBP	10,000	GBP	6,667
EUR	28,000	EUR	7,000	EUR	15,000	EUR	10,000
USD	40,000	USD	10,000	USD	15,000	USD	10,000
HKD	300,000	HKD	160,000	HKD	150,000	HKD	80,000
				AED	55,000		

Payment methods

Option 1

Use this option if you are paying by personal cheque or if you wish us to collect the payment from your bank on your behalf. Please tick the appropriate box and follow the instructions carefully.

By electronic transfer

Please complete the **bank instruction letter** which is available on our website or from your financial adviser and return it to us with this application form.

By personal cheque

Please make cheques payable to **Friends Provident International Limited**.

Option 2

Use this option if you are making your own arrangements for payment by **banker's draft** or **telegraphic transfer**. Please tick the appropriate boxes and complete the **Source of payment** section below.

I have arranged for the payment to be paid by **banker's draft**, as indicated below, payable to Friends Provident International Limited (Ref: policyholder). I have forwarded a certified copy of the Bank Acknowledgement Letter to Friends Provident International with this draft.

Investment instructions for Elite, Summit, Zenith and International Investment Account this option can only be used with banker's drafts for USD, GBP, EUR and HKD.

US dollar draft, drawn on a bank in New York

Swedish krona draft, drawn on a bank in Sweden

Sterling draft, drawn on a bank in the United Kingdom

Swiss franc draft, drawn on a bank in Switzerland

Euro draft, drawn on a bank in the European Economic and Monetary Union (EMU)

Australian dollar draft, drawn on a bank in Australia

HK dollar draft, drawn on a bank in Hong Kong

Japanese yen draft, drawn on a bank in Japan

I have arranged for the payment to be made by **electronic transfer** and I have forwarded a certified copy of the bank application form to Friends Provident International.

For **electronic transfer** reference, indicate your policy number

Source of payment

I confirm the telegraphic 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

Politically exposed persons

A Politically Exposed Person (PEP) is a person who is, or who has been, entrusted with prominent public functions. This also includes their close family members and their close associates.

Examples of PEPs include political figures, member of the judiciary, diplomatic service officers, managers and supervisors of state owned enterprises and senior ranking military officers.

1 Are you, any of your family members or any of your close associates a PEP? Yes No

If Yes, please provide the following details and complete the supplementary Source of Wealth Form.

2 Surname

3 Forename(s)

4 Position held as PEP

5 Country position held

6 Date position held From To

7 If the PEP is a family member or close associate, please confirm the relationship

Investment instructions for Elite, Summit, Zenith and International Investment Account

Please leave this section blank if you wish your existing fund choice to remain unchanged. If you want to change your fund choice, please indicate the funds in which you wish your additional premium to be invested, up to a maximum of 10. Please state the percentage of each investible premium you wish to be invested in each fund. Please note we can only accept whole percentages.

Fund code	Mirror fund	% of premium
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
Please use whole percentages only and make sure that the total is 100%.		Total 100%

Source of funds

SOURCE OF FUND DETAILS

The Insurance (Anti-Money Laundering) Regulations 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 all countries according to their level of compliance with international regulatory standards.

Full details on 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 questions 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)	<input type="text"/>	<input type="text"/>
2 Annual income last year (include currency)	<input type="text"/>	<input type="text"/>
3 Bonuses this year (include currency)	<input type="text"/>	<input type="text"/>
4 Bonuses last year (include currency)	<input type="text"/>	<input type="text"/>
5 Occupation	<input type="text"/>	<input type="text"/>
6 Employer's company name	<input type="text"/>	<input type="text"/>
7 Nature of business	<input type="text"/>	<input type="text"/>
Other unearned income		
8 Amount received (include currency)	<input type="text"/>	<input type="text"/>
9 Received from	<input type="text"/>	<input type="text"/>
10 Date received (DD/MM/YYYY)	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

If you intend to fund your plan from another source, please indicate which one from the list below for each applicant and provide the relevant information in the additional information box.

Source of funds	Applicant 1	Applicant 2	
Savings	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Bank where savings held How and over how long were savings accumulated?
Property of sale	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Address of property How long held Date of sale
Sale of assets	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Asset type How long held Date of sale
Company profits	<input type="checkbox"/>	<input type="checkbox"/>	Profits this year* Profits last year* Company name and industry
Company sale	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Company name and industry Date of sale
Maturing investment	<input type="checkbox"/>	<input type="checkbox"/>	Amount* From which company Date of sale
Lottery / betting / casino	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Source of win Date received
Compensation payment	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Reason for payment Date received
Gift or inheritance	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Relationship to benefactor Reason for gift Date received
Other	<input type="checkbox"/>	<input type="checkbox"/>	Amount* Reason for payment Date received

***Please include currency**

Friends Provident reserves the right to request further documentary evidence of source of funds should it be considered necessary.

Source of funds (continued)

Additional information

Declaration

I understand and acknowledge that this Single Premium top-up application form will form part of the original Application Form for my Reserve+ policy, and therefore all terms and conditions (including declarations) contained in such original Application Form are incorporated by reference and shall apply equally to this application form.

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 form, including this Declaration, are complete and true to the best of my knowledge and belief.

First (or only) applicant

Second applicant

Signature(s) of applicant(s)

Name (block capitals)

Date

Cancellation rights for Reserve +

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 (for the avoidance of doubt, calculated taking into account any third party fees incurred by Friends Provident International Limited in respect of the investments, including any external fund manager fees applied to the investments), 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.

For Reserve + : Each policy is governed by and shall be construed in accordance with the law of the United Arab Emirates.

Important information

The information given in this document is based on Friends Provident International Limited's understanding of current laws and Isle of Man taxation practice, which may change in the future. No liability can be accepted for any personal tax consequences of this scheme or for the effect of future tax or legislative changes.

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.

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. Information on the most recent performance of the Top Five Funds is available from Friends Provident International Limited.

All policyholders are protected by the Life Assurance (Compensation of Policyholders) Regulation 1991 of the Isle of Man, wherever their place of residence.

Investors 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 contracts.

Complaints we cannot settle can be referred to the Financial Services Ombudsman Scheme for the Isle of Man.

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

Unless stated otherwise above, each policy is governed by and shall be construed in accordance with the law of the Isle of Man. However, this will not preclude the right to bring legal action in a Hong Kong court. If you effect a policy whilst resident in the United Arab Emirates, all disputes regarding your investment will be subject to the non exclusive jurisdiction of the courts of the United Arab Emirates.

Data Privacy

We take the responsibility of handling your personal data very seriously and we will only ask you for details required to process your requests to us. Please be aware of our privacy policy – please visit www.fpinternational.com/legal/privacy-and-cookies to view the full policy or this can be provided on request from our Data Protection Officer.

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. **Singapore branch:** 182 Cecil Street, Level 17 Frasers Tower, Singapore 069547. Registered in Singapore No. T06FC6835J. Licensed by the Monetary Authority of Singapore to conduct life insurance business in Singapore. Member of the Life Insurance Association of Singapore. Member of the Singapore Financial Dispute Resolution Scheme. **Hong Kong branch:** 803, 8/F., One Kowloon, No.1 Wang Yuen Street, Kowloon Bay, Hong Kong. Authorised by the Insurance Authority of Hong Kong to conduct long-term insurance business in Hong Kong. **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.