

# STARTING OR ADDING TO YOUR OLD MUTUAL INTERNATIONAL EXECUTIVE WEALTHBUILDER ACCOUNT

For the individual investor

Not available in Hong Kong, Singapore, UK and USA

Old Mutual International Account number	<input type="text"/>
<small>(if reserved or if adding to an existing Executive Wealthbuilder Account)</small>	
<b>Financial adviser details</b>	
Old Mutual International account number	<input type="text"/>
Name of financial adviser	<input type="text"/>
Company name	<input type="text"/>
Address	<input type="text"/>
Telephone number	<input type="text"/>
Fax number	<input type="text"/>
E-mail address	<input type="text"/>
Old Mutual International only accepts business introduced by companies which have Terms of Business with us.	

June 2014

**This document was last reviewed in June 2014.** Please confirm with your financial adviser that this is the most up-to-date document for your product or servicing needs.

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

All references to Old Mutual International, **we**, **us** and **our** in this application form mean Old Mutual International Isle of Man Limited. For ease of reference all mentions to the Executive Wealthbuilder Account in this application form mean both Executive Wealthbuilder Account and Executive Wealthbuilder Account Redemption.

For simplicity all references to account, in this application, can also mean policy. For example, account currency also means policy currency. Also, all references to contribution also mean premium.

## TAXATION INFORMATION

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

## IMPORTANT INFORMATION FOR YOU – THE APPLICANT

This application form is for individual applicants only. Please note this application form must not be used by applicants resident in the United Kingdom, Hong Kong, Singapore or the United States of America or its territories.

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

- The brochure entitled '**Individual investment freedom**'
- The policy terms '**Details of your Executive Wealthbuilder Account (ref EWR2 for capital redemption and ref EWA4 for life assurance)**'
- '**The Executive Wealthbuilder Account at a glance**', and
- The addendum to the Old Mutual International literature pack - '**Important Information for clients. (Only applicable for DFSA regulated adviser firms)**'.

**For ease of reference we have used an arrow ► to highlight certain facts and sometimes to let you know that you can find further information and explanations in the guidance notes for starting or adding to your Old Mutual International Executive Wealthbuilder Account – for the individual investor (referred to as the guidance notes).**

**If the guidance notes are not attached to this application form please ask your financial adviser for a copy.**

## COMPLETING THE FORM

To complete this form:

- Use CAPITAL LETTERS only
- Use blue or black ink
- Complete all relevant sections
- Do not use correction fluid; any amendments should be crossed out, dated and initialled by all applicants.
- Specify choices as appropriate

**Please note that we must receive your application form by post or courier, we are unable to accept faxed or e-mailed versions.** We will contact you regarding any missing information which will need to be provided to us in writing, and this may delay your application.

## A TYPE OF APPLICATION

### NEW INVESTMENT

If this is an application for a NEW Executive Wealthbuilder Account, please indicate which type of account you are applying for (✓)

► Please refer to section A of the guidance notes which explain the difference between the two types of account. THE TYPE OF ACCOUNT CANNOT BE CHANGED AFTER IT HAS BEEN SET UP.

Life assurance  Capital redemption

### CHANGES TO CONTRIBUTION (IF YOUR EXECUTIVE WEALTHBUILDER ACCOUNT STARTED WITH A SINGLE LUMP SUM CONTRIBUTION THEN YOU CANNOT ADD REGULAR CONTRIBUTIONS TO IT)

If this is an application to change your total regular contribution, or make additional lump sum contribution payments please provide your existing Executive

Wealthbuilder Account number: (you can find this in your schedule)

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► Unless your details have changed, you only need to complete the full forename(s) and surname of each applicant and life assured in section B and C (if applicable). YOU MUST ALSO COMPLETE SECTIONS D, E, F, G (IF APPLICABLE), H, AND K (IF APPLICABLE). SECTION J, THE FINANCIAL ADVISER/SUITABLE CERTIFIER SECTION MUST BE COMPLETED IN ALL INSTANCES.

## B DETAILS OF INDIVIDUAL APPLICANT(S)

In this section, please give details of all individual applicant(s). Applicants must be at least 18 years old and the maximum age is 89.

If there are any further applicants, please photocopy this page, attach the details with this application form and tick here (✓)

► If additional pages are added, each separate page must be initialised by all applicants.

	APPLICANT 1	APPLICANT 2 (IF ANY)																
Title (✓)	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Other <input type="text"/>	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Other <input type="text"/>																
Full forename(s)	<input type="text"/>	<input type="text"/>																
Surname	<input type="text"/>	<input type="text"/>																
Previous name or alias ► Please refer to section B of the guidance notes	<input type="text"/>	<input type="text"/>																
Sex (✓)	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female																
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y											
D	D	M	M	Y	Y	Y	Y											
Occupation (if you have retired, please include your occupation before retirement)	<input type="text"/>	<input type="text"/>																
Nationality	<input type="text"/>	<input type="text"/>																
Dual nationality (if applicable)	<input type="text"/>	<input type="text"/>																
Passport number/national identity card number	<input type="text"/>	<input type="text"/>																
Country of residence	<input type="text"/>	<input type="text"/>																

continued

**B DETAILS OF INDIVIDUAL APPLICANT(S) (CONTINUED)****APPLICANT 1****APPLICANT 2 (IF ANY)**

Correspondence address

▶ Please refer to section B of the guidance notes

Postcode

▶ Old Mutual International accepts no responsibility for the consequences of sending correspondence to the address provided. Old Mutual International reserves the right to send correspondence to your residential address where regulations prevent it being sent to any other address.

Telephone number including area code (daytime)

Telephone number including area code (evening)

E-mail address

Reason for investment (for example, saving for retirement)

▶ You only need to complete this if you have selected life assurance in section A.

Is this applicant also going to be a life assured? (✓)

 Yes No Yes No**POLITICALLY EXPOSED PERSON**

If the applicant(s), or any other party connected to this application either now or in the past/future, could be classed as a politically exposed person (PEP), or connected with a PEP, please provide details. ▶ For examples of what a PEP is please refer to section B of the guidance notes

**EXISTING CONTRACT**

Please provide details of any existing Old Mutual International contract you have or are making payments to (if applicable)

Type of contract

Account number

**ALL APPLICANTS MUST COMPLETE AND SIGN THE DECLARATION IN SECTION H.**▶ **ADDITIONAL DOCUMENTS ARE NEEDED TO EVIDENCE YOUR IDENTITY – PLEASE REFER TO SECTION B OF THE GUIDANCE NOTES FOR FURTHER DETAILS.****C DETAILS OF THE LIFE/LIVES ASSURED (IF DIFFERENT FROM APPLICANT(S))****This section should only be completed if you have selected the life assurance option in section A.** Please note you do not need to complete this section if the applicant(s) will be the only life/lives assured, if this 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 (✓)

If additional pages are added, each separate page must be initialised by all applicants.

**FIRST ADDITIONAL LIFE ASSURED (IF ANY)****SECOND ADDITIONAL LIFE ASSURED (IF ANY)**

Title (✓)

 Mr  Mrs  Miss Other Mr  Mrs  Miss Other

Full forename(s)

Surname

Sex (✓)

 Male  Female

Date of birth

D | D | M | M | Y | Y | Y | Y

 Male  Female

D | D | M | M | Y | Y | Y | Y

Residential address

(where you are currently living)

Postcode

Postcode

Nationality

Dual nationality (if applicable)

Relationship to applicant(s)

continued

**C DETAILS OF THE LIFE/LIVES ASSURED (IF DIFFERENT FROM APPLICANT(S)) (CONTINUED)**

	THIRD ADDITIONAL LIFE ASSURED (IF ANY)	FOURTH ADDITIONAL LIFE ASSURED (IF ANY)
Title (✓)	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Other <input type="text"/>	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Other <input type="text"/>
Full forename(s)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Sex (✓)	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female
Date of birth	<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"/>
Residential address (where you are currently living)	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode <input type="text"/>	Postcode <input type="text"/>
Nationality	<input type="text"/>	<input type="text"/>
Dual nationality (if applicable)	<input type="text"/>	<input type="text"/>
Relationship to applicant(s)	<input type="text"/>	<input type="text"/>

**D CONTRIBUTION DETAILS (IF YOUR EXECUTIVE WEALTHBUILDER ACCOUNT STARTED WITH A SINGLE LUMP SUM CONTRIBUTION THEN YOU CANNOT ADD REGULAR CONTRIBUTIONS TO IT)**

- ▶ Please show your revised total regular contribution amount.
- ▶ Please state the contribution frequency you have chosen, when you set up your Executive Wealthbuilder Account.
- ▶ Before completing this section, please refer to section D of the guidance notes for information about paying in your contribution, ie your minimum investment amount, and full details regarding the different payment methods. Your Executive Wealthbuilder Account and your chosen funds must be denominated in the same currency that you pay your premiums/contributions in.

**ACCOUNT CURRENCY**

Payment currency (✓)     £                       US\$                       €

THE CURRENCY CANNOT BE CHANGED AFTER YOUR EXECUTIVE WEALTHBUILDER ACCOUNT IS SET UP.

**CONTRIBUTION PAYMENT**

**Initial contribution**

Lump sum contribution

(Minimum amount £5,000/US\$7,500/€7,500)

Regular contribution

Monthly

(Minimum amount £200/US\$300/€300)

Quarterly

(Minimum amount £600/US\$900/€900)

Half-yearly

(Minimum amount £1,200/US\$1,800/€1,800)

Yearly

(Minimum amount £2,400/US\$3,600/€3,600)

**Additional contributions**

**Additional lump sum contribution payment or change to regular contribution payment**

Additional lump sum contribution

(Minimum amount £1,000/US\$1,500/€1,500)

Revised regular contribution  
(Total amount)

Monthly

(Minimum amount £50/US\$75/€75)

Quarterly

(Minimum amount £150/US\$225/€225)

Half-yearly

(Minimum amount £300/US\$450/€450)

Yearly

(Minimum amount £600/US\$900/€900)

Lump sum payment method (✓)

- Credit card     Standing order     Cheque     Electronic bank transfer

Regular payment method (✓)

- Credit card     Standing order     Cheque     Electronic bank transfer



**E ORIGIN OF WEALTH (CONTINUED)**

**EMPLOYER DETAILS APPLICANT 1**

**APPLICANT 2 (IF ANY)**

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

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

If you have retired, please include details of your previous employer or your own company. Please also enter your final year's salary/income and bonus if any before retirement.

Name of employer or your own company	<input type="text"/>	<input type="text"/>
Address of employer or your own company	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Website address of employer or your own company (if any)	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	<input type="text"/>
Last year's gross salary / income (state currency and amount)	<input type="text"/>	<input type="text"/>
Last year's bonus (if applicable, state currency and amount)	<input type="text"/>	<input type="text"/>
If you receive income from another source, eg dividends, interest, please provide details here.	<input type="text"/>	<input type="text"/>

**FULL DETAILS OF ORIGIN OF WEALTH**

**PLEASE TICK THE DESCRIPTION OPTION(S) RELATING TO THE ORIGINAL SOURCE OF THE CONTRIBUTION FOR YOUR ACCOUNT. 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
<input type="radio"/>	<b>Regular income from employment</b> or	Details of last year's income and bonus as declared under Employer details above	<input type="text"/>
<input type="radio"/>	<b>Regular income from your business (ie if self-employed)</b>		

continued

**E ORIGIN OF WEALTH (CONTINUED)**

**FULL DETAILS OF ORIGIN OF WEALTH**

**PLEASE TICK THE DESCRIPTION OPTION(S) RELATING TO THE ORIGINAL SOURCE OF THE CONTRIBUTION FOR YOUR ACCOUNT. 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
<input type="radio"/> <b>Sale of shares</b> <input type="radio"/> <b>Maturing investments</b> <input type="radio"/> <b>Policy claim</b> <input type="radio"/> <b>Replacement policy</b>	Name of company that held your shares/investment/policy (ie bank, stockbroker or insurance company)	<input type="text"/>
	Name of person who held the shares/investment policy	<input type="text"/>
	How were they sold? (ie bank, stockbroker or other agent, if applicable)	<input type="text"/>
	Description of shares sold (if applicable)	<input type="text"/>
	Reason for policy claim or replacement policy (if applicable)	<input type="text"/>
	Total amount paid out	Currency: <input type="text"/> Amount: <input type="text"/>
	Surrender penalty incurred (if any)	<input type="text"/>
Date received	<input type="text" value="D D M M Y Y Y Y"/>	
Length of time the shares/investment/policy held	<input type="text"/>	
<input type="radio"/> <b>Sale of property</b>	Address of property sold (including postcode if applicable)	<input type="text"/> <input type="text"/> <input type="text"/>
	Total sale amount	Currency: <input type="text"/> Amount: <input type="text"/>
	Date of sale	<input type="text" value="D D M M Y Y Y Y"/>
<input type="radio"/> <b>Other unearned income</b> <input type="radio"/> <b>Sale of interest in company</b> <input type="radio"/> <b>Inheritance</b> <input type="radio"/> <b>Loan</b> <input type="radio"/> <b>Gift</b> <input type="radio"/> <b>Compensation</b> <input type="radio"/> <b>Competition or gambling win</b> <input type="radio"/> <b>Other</b>	Origin of wealth (if ticked other)	<input type="text"/>
	From which organisation or whom (state the relationship if applicable)	<input type="text"/>
	Details (including reasons where applicable, how the money was acquired, etc)	<input type="text"/>
	Total amount	Currency: <input type="text"/> Amount: <input type="text"/>
	Date received	<input type="text" value="D D M M Y Y Y Y"/>

► 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 before sending in your application form. For a list of the types of documentary evidence we may need, please refer to section E of the guidance notes.

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







## H DECLARATION AND APPLICATION

### DATA PRIVACY NOTICE – CONSENT BY EACH LIFE ASSURED AND THE APPLICANT(S)

Applicable for life assurance version only – please note that if each life assured has not signed the application, the applicant confirms that he/she has obtained the consent of each life assured to this Data Privacy Notice and is signing the application as his/her agent as well as applicant.

Old Mutual International Isle of Man Limited will process information ('Personal Data') about me and any other party whose Personal Data has been supplied. The processing of Personal Data will take place in a number of jurisdictions. Personal Data will be processed and may be released to other parties within or outside the Old Mutual Group for the following purposes to:

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

Where Personal Data is released to a third party for the provision of services relating to a Policy, the Personal Data will only be used for the purposes for which it is released and will be subject to adequate security and protection. In some circumstances this may involve a transfer of data to a third party outside the European Economic Area (EEA).

On receipt of a request to do so and on the payment of a small fee a copy of an individual's Personal Data will be provided to that individual. Any inaccuracies in an individual's Personal Data records will be rectified.

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

### IMPORTANT INFORMATION

Please read the following declaration carefully.

Any omission or misstatement of a material fact in this application could affect the payment of benefits under the Executive Wealthbuilder Account. A material fact is one which is likely to influence the assessment and acceptance of the application. If you are uncertain whether a fact is material, you should give full details so that 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 under any taxation, exchange control or insurance law to which you may be subject, you are able to effect the proposed contract.

### DECLARATION BY EACH APPLICANT

1. I understand and agree that the contract I am applying to enter with Old Mutual International will be subject to Isle of Man law and that the relevant Executive Wealthbuilder Account Terms and Conditions with the Terms reference details in section A for the account type I have selected, will be in the English language.
2. (a) If an Executive Wealthbuilder Account number is not shown in section A of this form, I request that the amount shown in section D, Additional Contribution, be invested as an initial contribution for accounts comprising an Old Mutual International Executive Wealthbuilder Account, and request Old Mutual International to issue the accounts in my name, jointly with the other applicants, if any; or  
(b) I request that the amount shown in section D, Additional Contribution, be invested as additional contributions for the Executive Wealthbuilder Account currently in force bearing account numbers consisting of the Executive Wealthbuilder Account number, as shown in section A of this form, followed by two or more digits.
3. I declare to the best of my knowledge and belief the statements made in this application, and any related documents, are true and complete and that I have not concealed any material fact.
4. I confirm that each life assured (or 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.
5. I authorise and request Old Mutual International to effect the transaction detailed in section G and confirm that such payments will discharge Old Mutual International from all liabilities and claims arising from those regular withdrawals. I understand that this authority supersedes any authority previously given.
6. I confirm that I am not resident in Hong Kong, Singapore, UK or the United States of America or its territories. If I become resident in the United States of America or its territories, I understand that Old Mutual International will not accept any further contributions until after I cease to be a resident of the United States of America or its territories.
7. I consent to my personal data being used in accordance with the Data Privacy Notice.
8. I understand that Old Mutual International accepts no responsibility for the consequences of sending documentation to the correspondence address entered in this application form, or to an address notified subsequently, and that Old Mutual International reserves the right to send correspondence to my residential address where regulations prevent it being sent to any other address.
9. I confirm that I am aware of the fees (if applicable) payable for the chosen investment(s) held in my policy. I understand that the fees exist partly to meet the promotion and distribution expenses of the product, including commission paid to a financial adviser and/or fund adviser.
10. I confirm that I have received a copy of the brochure, entitled '**Individual Investment Freedom**', '**the Executive Wealthbuilder Account at a glance**', '**guidance notes for starting or adding to your Old Mutual International Executive Wealthbuilder Account – for the individual investor**', '**Executive Wealthbuilder Illustration**', and the '**policy terms details of your Executive Wealthbuilder Account (ref EWA4 for life and EWR2 for redemption)**' and I have had the opportunity of reading them when completing this application form.
11. I appoint the financial adviser specified on page 1 of my application form to act on my behalf in accordance with the Policy Terms and Conditions.
12. 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.
13. The application for an Old Mutual International 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.

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

This application must be completed by the applicant(s) unless you have asked your financial adviser to complete it.

**Did you complete this application form yourself? (✓)**

Yes  No

**If No, did a third party, such as your financial adviser, complete it on your behalf? (✓)**

Yes  No

By signing this declaration you confirm that you have read through the above declaration and, if a third party has completed the application form on your behalf, that all the information provided in it is correct.

**H DECLARATION AND APPLICATION (CONTINUED)**

Signature of applicant 1	<input type="text"/>	Date	<input type="text"/>
Signature of applicant 2	<input type="text"/>	Date	<input type="text"/>
Signature of applicant 3	<input type="text"/>	Date	<input type="text"/>
Signature of applicant 4	<input type="text"/>	Date	<input type="text"/>

Copies of the Policy Terms and Conditions and/or this completed application form are available from Old Mutual International on request.

**I VERIFICATION OF CUSTOMER IDENTITY – FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE**

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

► **Please note that we will not be able to set the Executive Wealthbuilder Account live until this section has been completed and you have provided the necessary identification documentation. Please refer to section J 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.

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

► **Please tick (✓) to indicate the identification you have supplied for each individual party to the Executive Wealthbuilder Account.**

PART A		INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED	
1. Name	<input type="text"/>		
Capacity	<input type="text"/>		
Type of document	<input type="radio"/> Passport <input type="radio"/> National identity card		
Document reference	<input type="text"/>		
2. Name	<input type="text"/>		
Capacity	<input type="text"/>		
Type of document	<input type="radio"/> Passport <input type="radio"/> National identity card		
Document reference	<input type="text"/>		
3. Name	<input type="text"/>		
Capacity	<input type="text"/>		
Type of document	<input type="radio"/> Passport <input type="radio"/> National identity card		
Document reference	<input type="text"/>		
4. Name	<input type="text"/>		
Capacity	<input type="text"/>		
Type of document	<input type="radio"/> Passport <input type="radio"/> National identity card		
Document reference	<input type="text"/>		

**PART A – REASON WHY DOCUMENTS ARE NOT PROVIDED (IF APPLICABLE)**

continued

**I VERIFICATION OF CUSTOMER IDENTITY – FINANCIAL ADVISER/SUITABLE CERTIFIER TO COMPLETE (CONTINUED)**

PART B – PROOF OF RESIDENCE	INDIVIDUAL WHOSE IDENTITY IS BEING VERIFIED			
<b>These must be less than three months old</b>	1	2	3	4
1. A recent utility, rates or council tax bill (mobile/cell phone bills not acceptable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. A recent mortgage statement, giving the residential address	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. An extract from the official register of electors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. A state pension, benefit or other government produced document showing benefit entitlement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. A recent tax assessment document	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. A recent account statement from bank or credit card (store cards not acceptable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Proof of ownership or rental of the residential address	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If there are more than four applicants, please photocopy this page, attach the details with this application form and tick here (✓)

► If additional pages are added, each separate page must be initialled by all applicants.

Please contact us if you are unable to supply any of the above-mentioned documents.

**PART C – FINANCIAL CRIME – RISK RATING**

As part of the global efforts to prevent financial crime, Isle of Man authorised life companies adopt a ‘risk-based approach’ when obtaining evidence of the origin of a client’s wealth. This does not question the quality of the investment. It is a safeguard that will benefit the industry as a whole and ultimately protect the client as an investor.

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 contribution is paid from
- (a) + (b) = Total risk rating

Please refer to the origin of wealth guidelines for information on how to complete the table below.

Applicant	Client’s country of residence (a)	Country that the contribution is paid from (b)	Total risk rating
Example	Switzerland (1)	UK (1)	2

**This procedure is for guidance only.** Each new application, or application for an additional investment, will be reviewed individually.

Old Mutual International reserves the right to request further documentation if it is felt appropriate.

If you are unsure about a particular application, please contact your Old Mutual International consultant, or alternatively contact Old Mutual International’s Sales Support team directly on +44 (0)1624 655 009.

**J FINANCIAL ADVISER/SUITABLE CERTIFIER DECLARATION**

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

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

I declare that:

- I have verified the contents of the original documents where copies have been enclosed and confirm that they are true copies of the original
- I have taken reasonable steps to make sure that the funding is legitimate and in line with the 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 signed it.

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

**on**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Please enter allocation rate for this Executive Wealthbuilder Account**

				%
--	--	--	--	---

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

**Regulatory body authorisation number** (if applicable)

**Regulator name**

**Old Mutual International account number**

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**Full name of introducer firm**

**Full name of financial adviser /suitable certifier**

**Signature of financial adviser /suitable certifier**

**Date**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Financial adviser stamp**

**[www.oldmutualinternational.com](http://www.oldmutualinternational.com)**

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

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

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## APPLICANT CHECKLIST

(✓)

You should use this checklist to ensure you have completed all sections of the application form. Any missing information may delay your application.

### Section A – Type of application

If this is a new investment, have you indicated which type of account you are applying for?

If this is an additional investment, have you provided details of your existing account?

### Section B – Details of all individual applicant(s)

Have you filled in the details of all individual applicants?

(Each applicant must also sign the declaration in section H)

If you, the applicant, are going to be a life assured, have you ticked this option?

### Section C – Details of the life/lives assured (if different from applicant(s))

If you are applying for the life assurance version of the Executive Wealthbuilder Account and the life/lives assured are different to the applicant(s), have you completed the details of all additional lives assured?

(You do not need to complete this section if you are applying for the capital redemption version of the Executive Wealthbuilder Account.)

### Section D – Contribution details

Have you selected the currency and payment method for your contribution payment?

Have you stated the amount to be invested?

(The minimum initial investment amount is £5,000 for single contribution payments, £200 for regular monthly contribution payments and £600 for quarterly regular contribution payments, half-yearly £1,200 and yearly £2,400 (or other currency equivalent). If you are paying by cheque, please make the cheque or standing order payable to Old Mutual International Isle of Man Limited.)

### Section E – Origin of wealth

**This section must be completed in all instances.**

Have you completed your bank details?

Have you provided your employer's details (or if you are retired your employer before retirement)?

Have you provided full details of your origin of wealth?

### Section F – Investment choice

Have you filled in the investment choice table?

(The investment choice is needed for all applications.)

### Section G – Regular withdrawals (optional)

Have you selected the withdrawal amount, income, frequency and the date of your first payment?

For additional investments only, have you selected if your withdrawal should be based on your original or total contribution invested in the account?

Have you completed the payee details?

### Section H – Declaration and application

Has each applicant read the Data Privacy Notice?

Has each applicant read and signed the declaration?

## FINANCIAL ADVISER/SUITABLE CERTIFIER CHECKLIST

### Section I – Verification of customer identity

Have you completed parts A, B and C with the relevant details for each applicant?

Have you enclosed the relevant identification documentation with this application form?

### Section J – Financial adviser/suitable certifier declaration

Have you completed all the details in this section?