

# Application Form for Additional Investments Provided by RL360 Insurance Company Limited (RL360)

RL360°



### Application guide

This form is an application to make an additional investment into your Wrap Offshore Bond. It can be used by individuals, trusts, companies or corporate entities.

Please complete this form in BLOCK CAPITALS and black ink and return it to: RL360 Insurance Company Limited, c/o James Hay Wrap Managers Limited, Dunn's House, St Paul's Road, Salisbury, SP2 7BF.

If you require any assistance, please telephone your Customer Support Team or our general enquiry number 03455 212 414.

### U.S. Specified Person

U.S. Specified Person means a U.S. citizen or tax resident individual, who holds a U.S. Passport, a U.S. Green Card, has a U.S. residential/correspondence address or who was born in the U.S. and has not renounced their U.S. citizenship.

More information on U.S. FATCA can be found at www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA.

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

If you are not a U.S. Specified Person but you have a U.S. residential/correspondence address, hold a U.S. Passport, a U.S. Green Card or you were born in the U.S., you will need to provide us with documentary evidence that you are in the process of or have renounced your U.S. Citizenship. RL360 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.

## Important notice

This application should be read in conjunction with the Wrap Offshore Bond literature, including the Wrap Offshore Bond Terms and Conditions. Copies of this completed application form and the Wrap Offshore Bond Terms and Conditions are available on request.

The contract could be invalidated by any failure to disclose facts, which might influence our assessment of this application. If you have any doubt as to whether a fact is relevant then you should disclose it on the Notes section at the back of this application form.

1 Plan details	
	Applicant to complete
James Hay Wrap number	Wrap Offshore Bond number
	WR
1a Individual applicant	Applicant to complete
Policyholder 1	Policyholder 2
Full name	Full name
National Insurance number <sup>1</sup>	National Insurance number <sup>1</sup>
Country or countries of tax residence	Country or countries of tax residence
Are you a US Specified Person? Yes No	Are you a US Specified Person? Yes No

<sup>1</sup> Where you do not have a National Insurance number, please provide your Tax Identification Number or US Social Security Number instead.

Trust name	Settlor's country or countries of tax residence
Full name	Trust's Unique Tax Reference (UTR)
Settlor's National Insurance number <sup>1</sup>	
	Is the trust registered with HMRC? Yes No Is the entity (trust) a US Person? <sup>2</sup> Yes No
<sup>1</sup> Where you do not have a National Insurance number, please prov Number instead.	
would have authority under applicable laws to render order or jude of the trust and one or more US Persons have the authority to conthat is a citizen or resident of the United States; a person that me determine whether an individual who is not a citizen or lawful per	f Columbia); an estate or a trust if a court within the United States dgments concerning substantially all issues regarding administration ntrol all substantial decision of the trust or an estate of a decedent
Trustee 1 full name	Trustee 3 full name
Trustee 1 National Insurance number <sup>3</sup>	Trustee 3 National Insurance number <sup>3</sup>
Trustee 1 country or countries of tax residence	Trustee 3 country or countries of tax residence
Are you a US Specified Person? Yes No	Are you a US Specified Person? Yes No
Trustee 2 full name	Trustee 4 full name
Trustee 2 National Insurance number <sup>3</sup>	Trustee 4 National Insurance number <sup>3</sup>
Trustee 2 country or countries of tax residence	Trustee 4 country or countries of tax residence
Are you a US Specified Person? Yes No  3 Where you do not have a National Insurance number, please prov	Are you a US Specified Person? Yes No

<sup>&</sup>lt;sup>3</sup> Where you do not have a National Insurance number, please provide your Tax Identification Number or US Social Security Number instead.

1c Company	Applicant to complete
Company name	Executive Director/Partner 2
	Full name
Company tax number(s)	
	National Insurance number <sup>3</sup>
Country or countries of tax residence	
	Country or countries of tax residence
Executive Director/Partner 1	Are you a US Specified Person? Yes No
Full name	
National Insurance number <sup>3</sup>	
Country or countries of tax residence	
Are you a US Specified Person? Yes No	
<sup>3</sup> Where you do not have a National Insurance number, please pr Number instead.	ovide your Tax Identification Number or US Social Security
1d Corporate trustee	Applicant to complete
Corporate trustee's name	Global Intermediary Identification Number (GIIN)
2 Investment amount	Applicant to complete
Please provide details of the additional amount you wish to invest into your Wrap Offshore Bond.	Please confirm if the investment amount is to be transferred by electronic transfer from your Investment Portfolio Bank Account.
£	FORTOIIO BAIR ACCOUNT.

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Please note: The minimum top up investment is £5,000.

3 Investment options	Applicant to complete
Please indicate your investment choices by ticking one or more of the following. Purchase of your assets will be made from the	Managed Portfolio Panel
cash account within your Wrap Offshore Bond.	Your financial adviser can select a model portfolio on the Managed Portfolio Panel using James Hay Online.
You should retain sufficient cash in your Wrap Offshore Bond cash account to pay monthly Wrap and transaction charges in respect of remuneration to avoid us having to encash assets to meet such charges.	PLEASE NOTE: Your financial adviser will need to agree to the investment manager's terms of business prior to investing into a model portfolio on the Managed Portfolio Panel. If you select this option you will be unable to hold
I wish to buy the following:	any Investment Centre funds outside of one of the model portfolios on the panel. If you already hold funds in the
Investment Centre funds	Investment Centre, these will need to be sold prior to
Please place these trades through the secure web service, James Hay Online.	investment via the Model Portfolio Panel.  For full details of the range of assets available, please refer
Non Investment Centre funds	to the 'Wrap Offshore Bond Guidelines for Permitted Assets' document. The 'Instruction to Trade Form' and the 'Wrap
If you wish to buy funds that are not available in the Investment Centre, please complete an 'Instruction to Trade Form' and enclose the appropriate fund manager's application form having completed the amount to be invested, the fund choice and remuneration details. As the investment will be made by James Hay Partnership, we will complete the rest of the investment application form.	Offshore Bond Guidelines for Permitted Assets' document are available at www.jameshay.co.uk.
4 Regular withdrawal instructions	Applicant to complete
Do you wish to set up regular withdrawals from your	If <b>Yes</b> , is this on the same basis as for your existing investment?
additional investment immediately?	Yes No No
Yes No No	If <b>No</b> , please complete a Partial Surrender Request/Regular Withdrawal Form.
	Please note: It is not possible to set up regular withdrawals from Investment Centre funds.
5 Source of funds and wealth	
The Anti-Money Laundering and Countering the Financing of Terrorism Code 2019 requires all Isle of Man Companies to take 'reasonable measures to establish the source of the wealth of a customer' where any business is identified as high risk. Source of wealth is defined as the 'origin of a customer's entire body of wealth and includes the total assets of the customer'. This reflects the Isle of Man's commitment to maintain the highest possible standards of business practice and to counter money	Full details on the source of funds procedures can be obtained from your financial adviser or can be downloaded from www.rl360wrap.com.  If you are funding your Wrap Offshore Bond from a bank account that is not in the United Kingdom, Channel Islands or Isle of Man, please refer to the above mentioned documentation for further guidance.
laundering and the financing of terrorism.	•
RL360 has adopted a risk-based approach to meet these regulations, categorising the product and countries that they will accept business from into Standard or Higher risk. They have categorised countries according to their level of compliance with international regulatory standards.	In order for RL360 to comply with its obligations under the Isle of Man's Anti-Money Laundering and Countering the Financing of Terrorism Code 2019, you must answer the following questions fully.
5a Source of funds	Applicant to complete
Please provide us with the details of your bank account that you will use to fund your Wrap Offshore Bond.	OR  Bank sort code (for UK GBP payments only)
Bank name and address	
	IBAN (all non-GBP accounts)
Postcode	OR
Account holder's name	Account number (GBP UK bank only)

years

If you are funding your Wrap Offshore Bond from more than one bank account, please provide your additional bank details and your reasons for doing this on the Notes section at the

months

Account held for

back of this application form.

Branch swift code (for all non-GBP and international payments). Swift code must be either 8 or 11 digits

First applicant	Second applicant (if applicable)
Annual salary plus bonuses	Annual salary plus bonuses
If you are retired, please provide your income details in the 'Other unearned income' section.	If you are retired, please provide your income details in the 'Other unearned income' section.
Income this year (include currency)	Income this year (include currency)
Income last year (include currency)	Income last year (include currency)
Occupation	Occupation
Cocapation	Cocapation
Employer's company name	Employer's company name
Employer's company name	Employer's company name
Nature of business	Nature of business
Tractal C of Eduliness	reduction of business
Other unearned income	Other unearned income
Amount received (include currency)	Amount received (include currency)
(and an analy)	
Received from	Received from
Received from	received from
Date received DDMMYYYYY	Date received DDMMMYYYY
If you are retired, please tell us your previous occupation, previous salary, employer and date of retirement.	If you are retired, please tell us your previous occupation, previous salary, employer and date of retirement.
Previous occupation	Previous occupation
Previous salary (if retired)	Previous salary (if retired)
Trovious suitary (in realists)	romas salary (ii rom say
Employer's company name	Employer's company name
Employer's company name	Employer's company hame
Date retired DDMMYYYYY	Date retired DDMMYYYYY
Please confirm your source of wealth for this application by completing the relevant boxes.	Please confirm your source of wealth for this application by completing the relevant boxes.
Savings	Savings
Amount received (include currency)	Amount received (include currency)
Bank where savings where held	Bank where savings where held
How were savings accumulated?	How were savings accumulated?
Pension transfer	Pension transfer
Amount received (include currency)	Amount received (include currency)
Received from	Received from
Date received DDMMYYYYY	Date received DDMMYYYY

5b Source of wealth (cont.)	Applicant to complete
First applicant Property or asset sale	Second applicant (if applicable) Property or asset sale
Amount received (include currency)	Amount received (include currency)
Address of property sold, or asset type	Address of property sold, or asset type
Postcode	Postcode
For how long was it held?	For how long was it held?
Date of sale	Date of sale
Company profits	Company profits
Profits this year (include currency)	Profits this year (include currency)
Profits last year (include currency)	Profits last year (include currency)
Fronts last year (include currency)	Profits last year (include currency)
Industry	Industry
Company sale	Company sale
Amount received (include currency)	Amount received (include currency)
Company name	Company name
Company industry	Company industry
Date received DDMMYYYYY	Date received DDMMYYYYY
Date received DDMMYYYYY	Date received DDMMYYYYY
Other (such as a lottery or betting win, gift or inheritance)	<b>Other</b> (such as a lottery or betting win, gift or inheritance)
Amount received (include currency)	Amount received (include currency)
Source	Source
Date received DDMMYYYYY	Date received DDMMYYYYY

Please ensure the relevant source of funds evidence indicated in this section has been included with the application form.

I/We agree that my/our additional investment will be treated in line with the Wrap Offshore Bond Terms and Conditions.

I am/We are not resident in the United States. 4

I/We declare that the above answers are true to the best of my/our knowledge and that I/we have not withheld any information that may influence the assessment or acceptance of this application.

I/We give my/our express consent for the information in this form to be processed.

I/We agree that any supplementary questionnaire will form part of my/our application to RL360 and that non-disclosure of any material fact known to me/us may invalidate the contract.

I/We accept that RL360 can bring the contract to an end if I/we have failed to detail any facts that may influence the decision to accept this application.

I/We confirm that to the best of my/our knowledge and belief, I am/we are not subject to any legislation that would make my/our investment unlawful.

#### **Data Protection**

RL360's full privacy statement can be viewed at www.rl360.com/pages/privacy-policy.htm ('RL360 Privacy Policy') or can be obtained by requesting a copy from their Data Protection Officer.

For the purposes of the services and the product, RL360 is the controller and is responsible for your personal data. RL360 is part of the International Financial Group Limited which is made up of various legal entities, details of which can be found within the RL360 Privacy Policy ('RL360 Group').

This form collects your personal data. RL360 requires your personal data in order to provide you with services relating to the performance of your contract. You may ask RL360 to stop processing your data, however this may disrupt the services RL360 can provide to you or may stop them being able to assist you. To find out how long RL360 will keep your data, please refer to their privacy policy at www.rl360.com. Any data you provide to RL360 may be shared, if allowed by law, with other companies both inside and outside of the RL360 Group and to persons who act on your behalf. Data and information about you can be transferred outside of the Isle of Man and RL360 may be required to provide it to its regulator, its government or anyone else required by law.

RL360 will use your data and information to allow for the administration of your policy, prevent crime, prosecute criminals and for market research and statistics. RL360 will, at all times, make sure that your data and information is only used in ways that are allowed by law.

You can receive a copy of the information RL360 holds about you free of charge by writing to their Data Protection Officer at: RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles, or by emailing dpo@rl360.com.

RL360 can reserve the right to not send you your personal data in some circumstances; if they do RL360 will write to you setting out the reasons why.

I/We confirm that advice leading to the application was received in (give location)	
And the application form was signed in (give location)	
Signature of First Policyholder/Trustee/Authorised Signator	У
Print name	
Date received DDMMYYYYY	
Signature of Second Policyholder/Trustee/Authorised Signat	ory:
Print name	
Date received DDMMYYYYY	
Signature of Third Trustee/Authorised Signatory	
Print name	
Date received DDMMYYYYY	
Signature of Fourth Trustee/Authorised Signatory	
Print name	
Date received DDMMYYYYY	

<sup>&</sup>lt;sup>4</sup> United States means the United States of America, its territories and possessions, any state of the United States and the District of Columbia.

Notes	

We are able to provide literature in alternative formats. For a Braille, large print, audio or E-text version of this document call us on 03455 212 414 (or via the Typetalk service on 18001 03455 212 414).

RL360 Insurance Company Limited. Registered Office: International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles. Telephone: +44 (0)1624 681681. Telephone calls may be recorded. Website: www.rl360.com. RL360 Insurance Company Limited is authorised by the Isle of Man Financial Services Authority. Registered in the Isle of Man number 053002C.

James Hay Partnership is the trading name of Nucleus Group Services Limited (NGSL) (registered in England number 02538532); James Hay Services Limited (JHS) (registered in Jersey number 77318); IPS Pensions Limited (IPS) (registered in England number 2601833); James Hay Administration Company Limited (JHAC) (registered in England number 4068398); James Hay Pension Trustees Limited (JHWN) (registered in England number 1435887); James Hay Wrap Nominee Company Limited (JHWNC) (registered in England number 7259308); PAL Trustees Limited (PAL) (registered in England number 1666419); Sarum Trustees Limited (SarumTL) (registered in England number 1003681); The IPS Partnership Plc (IPS Plc) (registered in England number 1458445); Union Pension Trustees Limited (UPT) (registered in England number 2634371). JHS has its registered office at Aztec Group House, 11-15 Seaton Place, St Helier, Jersey, JE4 OQH. NGSL, IPS, JHAC, JHWN, JHWNC, PAL, SarumTL, IPS Plc, and UPT have their registered office at Dunn's House, St Paul's Road, Salisbury, SP2 7BF. JHAC, JHWM, IPS and IPS Plc are authorised and regulated by the Financial Conduct Authority. (2/23)

www.jameshay.co.uk