

RL360°

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In this section, tell us how your funds were accumulated. It is important that you complete this section so that we can meet Isle of Man anti-money laundering requirements.

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In this section you must agree to the plan terms and conditions and sign where appropriate.

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COMPLETION

Please complete this form using BLOCK CAPITALS throughout. Please tick boxes where applicable and follow the instructions provided in each section. Please use Section 10 - Application Checklist before submitting your application, to make sure that you provide us with everything we need to process your application.

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. 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.

A copy of the completed application and the plan Terms and 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@rl360.com or alternatively post it to: New Business Team, RL360, International House, Cooil Road Douglas, Isle of Man, IM2 2SP, 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 RL360 within this application form mean RL360 Insurance Company Limited.



You should provide us with verification of your identity and current residential address (see page 14 for details).

	Applicant 1				Ар	plicant	2			
Sex (please tick)	Male		Female			Male			Female	
Title (please tick)	Mr	Mrs	Miss			Mr	Mrs		Miss	
				Other (in full)						Other (in full)
First name(s)										
Last name(s)										
Date of birth (dd/mm/	уууу)									
Country of birth										
Nationality										
Country of residence for tax purposes										
Are you a Specified US	S Person?	Yes	No			Yes	No			
Tax Identification Num If unavailable, provide	` ′ ∟	quivalent ((eg National Ir	nsurance Number,	Social	Security	Number,	Reside	ent Registr	ation Number)
Current residential address and postcode (in full)										
Country										
Home telephone numb	per [
Mobile telephone num	ber									
Relationship to Applic	ant 1									
Online services If you wish to access of	details of you	r plan onli	ine, you must	t supply us with t	ne follo	owing in	formation	١.		
Email address										
Password (You will only use this once. Please note that the pa	assword is ca	se sensitiv	/e.)							
Password hint										



Correspondence details

Please note that any correspondence we are required to send to you will be sent to the address you provide here. If no correspondence address is supplied we will use the current residential address of the first applicant.

Address and postcode for correspondence						
Is this address for	You	Your finan	icial adviser	A friend	A family m	ember
If this address is for you, please provide details of additional property						
There may be up to six either applicant is a life. Applicant 1 is a life.	lives assured added to e assured, tick the app		elow and proceed to			olan starts. If
Sex (please tick)	Life assured 1	Female		Life assured 2	Female	
Title (please tick)	Mr Mrs	Miss		Mr Mrs	Miss	
			Other (in full)			Other (in full)
First name(s)						
Last name(s)						
Date of birth (dd/mm/	уууу)					
Nationality						
Current residential address and postcode (in full)						

Country



ι	_ife assured 3		Life assured 4
Sex (please tick)	Male	Female	Male Female
Title (please tick)	Mr Mrs	Miss	Mr Mrs Miss
		Other (in full)	Other (in full)
First name(s)			
Last name(s)			
Date of birth (dd/mm/y	ууу)		
Nationality			
Current residential address and postcode (in full)			
Country			
ı	_ife assured 5		Life assured 6
Sex (please tick)	Male	Female	Male Female
Title (please tick)	Mr Mrs	Miss	Mr Mrs Miss
		Other (in full)	Other (in full)
First name(s)			
Last name(s)			
Date of birth (dd/mm/y	ууу)		
Nationality			
Current residential address and postcode (in full)			
Country			
Politically Exposed Per A Politically Exposed Pe their close family memb	erson (PEP) is a person		d with prominent public functions. This also includes
Examples of PEPs include owned enterprises and s			ervice officers, managers and supervisors of state
Are you, any of your far	mily members or any	of your close associates a PEP?	Yes No
If Yes, please provide the	e following details and	d complete the supplementary Sour	rce of Wealth Form.
Surname			
Forename(s)			
Position held as PEP			
Country position held			
Dates position held	From	То	
If the PEP is a family member or close associate, please confirm the relationship			



Who will fund the plan?	The applicant(s)	Employer	Spouse	Parent	Other
If the payer is anyone other than further details.	the applicant(s), please ref	er to Section 10 - App	olication Checklist, T	hird party payment:	s for
IMPORTANT: The following infor	rmation MUST match the do	etails shown on your	Key Information Do	cument.	
Plan currency Please tick only one:	GBP USD	EUR CHF	AUD HKD	JPY	
Payment Please remember the minimum equivalent minimums.	payment is GBP20,000 or	currency equivalent.	Please refer to the	Product Guide for c	urrency
If the currency of the initial payr plan using the relevant exchange		the chosen plan curre	ency, we will conver	t this into the curre	ncy of the
Amount		(Curren	cy and cash amount)	
Segments Please state your required numb blank we will issue your plan wit	-	num number of segm	ents is 1 and the ma	ximum is 100. If you	ı leave this
Number of segments					
IMPORTANT: some banking institution bank if any charges will apply protransfers is enough, so that the name of the state o	rior to transferring your pa	yment to us. If they d	o, please make sure		
Payments by telegraphic transfe	er or cheque				
Please confirm the details of the	e bank that you will be mak	ing payment from.			
If you want to use a Currency Ex RL360 first. Please also provide to evidence the transfer to us.					
Bank name					
Bank address and postcode					
Account holder's name					
Branch SWIFT code (for all non-GBP and international SWIFT code must be either 8 or			OR Bank sort cod (for UK GBP p	e]-
IBAN/account number (all non-GBP accounts)			OR Account numb		
Account held for	years	months			

FUND REQUIREMENTS

If you wish to use an investment adviser you should complete our Investment Adviser Appointment Form, returning it along with your application. If you need additional space to complete this section, please use Section 07 - Additional Information.

Your funds

Please list your choice of funds below. There are no limits to the number of funds you can hold in your plan. The minimum you can invest in each fund is GBP500. Please refer to the Product Guide for currency equivalent minimums. Please also ensure that the percentages entered for each fund total 100% of the payment.

ISIN	Fund manager	Fund name (including currency)	Percentage
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
		Total	100%

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.

RL360 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 on the source of funds procedures can be obtained from your financial adviser or can be downloaded from www.rl360.com/sourceoffunds.pdf.

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

	Applicant 1	Applicant 2
Annual salary plus bo	nuses	_
Annual salary this year (include currency)		
Bonuses this year (include currency)		
Annual salary last year (include currency)		
Bonuses last year (include currency)		
Occupation		
Employer's company name		
Nature of business		
If you are retired please	e tell us your previous occupation, salary, employer	and date of retirement.
Previous occupation		
Salary (include currency)		
Employer's company name		
Date retired (dd/mm/y	ууу)	
Other unearned incom	ne	_
Amount received (include currency)		
Received from		
Date received (dd/mm	/уууу)	

Where your source of funds for this application is from any of the following, please provide details.

Cavinas	Applicant 1	Applicant 2
Savings Amount received (include currency)		
Bank where savings were held		
How and for how long were the savings accumulated?		
Danaian tuanafau		
Pension transfer Amount received (include currency)		
Received from		
Date received (dd/mm	n/yyyy)	
Property or asset sale Amount received (include currency)	e	
Address of property sold or asset type		
How long held		
Date of sale (dd/mm/	уууу)	
Company profits Profits this year (include currency)		
Profits last year (include currency)		
Industry		
Company sale		
Amount received (include currency)		
Company name		
Company industry		
Date received (dd/mm	n/yyyy)	
	ng investment, lottery or betting win, gift or inheritar ent please confirm how long held).	nce (for inheritance please state from who,
Amount received (include currency)		
Source		
Date received (dd/mn	n/yyyy)	

RL360 reserves the right to request further documentary evidence of source of funds should it be considered necessary.



If you do not wish to set up regular withdrawals on the plan at this stage, please continue to Section 07 - Additional Information.

Please remember that the minimum regular withdrawal is GBP250 or currency equivalent. Regular withdrawals will be paid in the

plan currency unless you tell us otherwise in Section 07 - Additional Information. As fixed amount How do you want to take the Tell us the amount withdrawals? (choose only one) OR As a percentage Tell us the percentage of the total initial payment % Half-yearly Withdrawal frequency Monthly Quarterly Yearly Termly Date of first withdrawal (dd/mm/yyyy) BACS Payment method BACS payments require up to three days to clear and can only be used for GBP payments to a UK bank account. A GBP20 (or currency equivalent) charge applies to payments made by TT. If you would like withdrawals to be paid back to the same bank account as detailed in Section 03 - Plan Requirements, please tick below. Otherwise please specify the bank account to be used to receive withdrawals. Payments can only be made to bank accounts in your name, as the applicant. Please use the bank account details in Section 03 - Plan Requirements. Bank name Bank address and postcode Account holder's name Branch SWIFT code **OR** Bank sort code (for UK GBP payments only) (for all non-GBP and international payments) SWIFT code must be either 8 or 11 digits IBAN/account number **OR** Account number (GBP UK Bank only) (all non-GBP accounts)

months

years

Account held for

If you have no additional notes, please continue to Section 08 - Declaration.



Plan literature

I confirm that I have read a copy of the plan literature including the Product Guide, Key Information Document and Terms and Conditions.

My application

I confirm that all of the information provided in this application, along with any supporting forms, questionnaires, statements, reports or other information is true and complete.

Availability

I confirm that to the best of my knowledge and belief, I am not subject to any legislation that would make my investment into this plan unlawful.

Illustration

I understand that my Illustration is not guaranteed by RL360 or my adviser, and only offers an indication of what I might get back under a limited number of scenarios. I accept that RL360 is not responsible for monitoring whether my plan's performance matches the assumptions made in my Illustration.

Key Information Document (KID)

I confirm that I have included a signed KID with this application. I understand that the KID sets out the details of my plan, and by signing it I acknowledge that I am aware of the charges that will be deducted. I am also aware that the details that I have provided in Section 03 - Plan Requirements must match my signed KID. If they are different RL360 will ask me to sign a new KID matching Section 03 - Plan Requirements before it can allow my plan to start.

Investment

I am aware that RL360 does not provide investment advice. RL360 is not responsible for managing funds and does not determine whether or not funds are suitable for me. I understand that should the plan offer access to a range of funds, these are managed by external companies. I accept that ultimate responsibility for fund selection lies with me and/or my appointed adviser; if funds underperform and as a consequence my plan drops in value, I accept this is not the fault of RL360.

I request that RL360 allocates the payment to the funds selected as part of this application. In order for RL360 to do this, I confirm the following:

- a) I agree to RL360 acting on dealing instructions received from me or the appointed investment adviser, and I will read the documentation issued by the fund manager for each fund prior to selecting it for the plan.
- b) I am aware that some funds may have terms and conditions that could:
 - i) restrict RL360 from realising a cash value when requested and prevent RL360 paying out benefits from the plan in a timely fashion.
 - ii) result in RL360 receiving the cash value from a sale in multiple instalments. If this should happen RL360 has the right not to re-invest or pay in full, benefits from the plan until the amount has been received in full.
 - iii) result in RL360 receiving a payment from a sale by a means other than cash. If this should happen RL360 may require us to cancel some or all of the plan.
 - iv) result in RL360 having to pay back some or all of the sale proceeds if an adjustment has to be made after the payment. If RL360 is required to make such a repayment and the plan value is too low to cover it, or I have cancelled the plan, I agree to compensate RL360 for any loss that it has suffered as a result.
- c) I accept that RL360 has the right to sell funds linked to the plan without requiring my permission. RL360 may do this if it decides that a fund may have harmful legal or tax consequences under law.
- d) I am aware that there may be fees to pay when RL360 sells one or more of the funds linked to the plan. Any fees due when selling a fund should be detailed by the fund manager in the fund documentation.
- e) I confirm that I am aware of the fees that must be paid in relation to the chosen funds. I realise that these fees are required to cover the costs of promoting and distributing the funds, including any commission paid to my appointed adviser(s).



Data protection

This form collects your personal data. We require your personal data so we can provide you with services relating to the performance of your plan. You may ask us to stop processing your data, however this may disrupt the services RL360 can provide to you or may stop us being able to assist you. To find out how long we will keep your data, please refer to our privacy policy at www.rl360.com/privacy. Any data you provide to RL360 may be shared, if allowed by law, with other companies both inside and outside of RL360 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 plan, 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 our Data Protection Officer at: RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles, or by emailing dpo@rl360.com. We can reserve the right to not send you your personal data in some circumstances - if we do we will write to you setting out the reasons why.

Our full privacy policy can be viewed at www.rl360.com/privacy or can be obtained by requesting a copy from our Data Protection Officer.

Legal

I agree to my plan being governed by Isle of Man law and to the Isle of Man Courts having the right to decide any case that maybe brought in relation to my plan.

Cancellation

I am aware that I have the right to cancel my plan as detailed in the Key Information Document. I understand that the amount I get back may be less than what I paid where my selected funds have fallen in value. I am aware that to cancel my plan I will need to complete the Cancellation Notice and return it to RL360.

Final agreement

I agree to the following documents forming the basis of the contract between me and RL360:

- this Application Form
- My Key Information Document
- The Terms and Conditions
- The Plan Schedule
- Any Endorsement to the Plan Schedule.

I accept that RL360 can bring my plan to an end if I have failed to detail any facts that may influence the decision to accept this application.



Financial adviser I have appointed		(company name) to act as my financial adviser.
	g all information relating to my plan to my	y appointed financial adviser. I will let RL360 know in writing
I confirm that this applicat	on was signed in (give country)	
Ар	plicant 1	Applicant 2
Signed		
Date (dd/mm/yyyy)		
FINANCIAL A	ADVISER DETAILS	
This section is to be com	pleted by your financial adviser.	
The RL360 adviser numb	er can be obtained from your regional offi	ce.
Company name		
RL360 adviser number		
Financial adviser's stamp (if this does not state an address, please complete company address details t		
Full name		
Online services username (if registered)		
Email address		
Signed		
Date (dd/mm/yyyy)		

APPLICATION CHECKLIST

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

Verification of identify - 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 (pleas	se tick to confirm)	I have prov	rided identification (please tick to confirm)		
If you are unable to	provide ID please co	nfirm why below:	If you are unable to provide ID please confirm why below:			
Please send a suitak any of the documen why no documents	oly certified copy of tts listed below, plea are available. The do	se complete our confirmat	ng documents fo ion of residentia	or each applicant. If you are unable to provide all address form to provide us with reasons cuments can be obtained and can be found at		
Applicant 1 (please tick which documents you have sent us)	Applicant 2 (please tick which documents you have sent us)	Type of document		Conditions		
				The document must be no more than 6 months old		
				If the statement or bill has been issued electronically, it must clearly show the		
		A recent rates, council tax (mobile phone bills are no	•	address of your property		
		Correspondence from a co	entral or local	The document should be no more than 6 months old, or the most recent version where issued annually		
		A photographic driving lic	ence	The document must be in date and valid		
		A photographic national id	dentity card	The same document cannot be used to evidence your identity		
		A full tenancy agreement		The agreement must be in date The agreement must be signed by all parties		
		Proof of ownership of you such as lawyer's confirmat property purchase or a leg recognising title to the pro	ion of a gal document	The document must be signed by all appropriate parties		
				on who can suitably certify your documentation ines-for-individual-applicants.pdf		
Confirmation of pla Please make sure you Information Docume	ou have completed S	iection 03 - Plan Requirem	ents and have ir	ncluded a signed Illustration and Key		
I have provided	my plan requiremen	ts and can confirm that the	y match my Key	Information Document (please tick to confirm).		
I have included	a signed Illustration	and Key Information Docu	ment (please tid	ck to confirm).		

PAYMENT METHODS

Your payment can be paid using any of the following methods.

Telegraphic transfer

If you are paying into your plan by telegraphic transfer please instruct your bank to quote your name as a reference.

Your payment must come from the bank account you have detailed in Section 03 - Plan Requirements.

Please make your payment to RL360 Insurance Company Limited through the appropriate bank below.

Currency	SWIFT code	IBAN	Sort code	Account number	Bank name	Account name
AUD	CITIGB2LXXX	GB45 CITI 1850 0813 1419 34	18-50-08	13141934	Citibank, London	RL360
CHF	CITIGB2LXXX	GB26 CITI 1850 0813 1418 88	18-50-08	13141888	Citibank, London	RL360
EUR	CITIGB2LXXX	GB20 CITI 1850 0813 1418 02	18-50-08	13141802	Citibank, London	RL360
GBP	CITIGB2LXXX	GB34 CITI 1850 0813 1420 35	18-50-08	13142035	Citibank, London	RL360
HKD	CITIGB2LXXX	GB10 CITI 1850 0813 1416 91	18-50-08	13141691	Citibank, London	RL360
JPY	CITIGB2LXXX	GB26 CITI 1850 0813 1415 00	18-50-08	13141500	Citibank, London	RL360
USD	CITIGB2LXXX	GB54 CITI 1850 0813 1415 78	18-50-08	13141578	Citibank, London	RL360

Bank address

The bank address for all the above accounts is: Citibank, Citigroup Centre, Canada Square, Canary Wharf, London, E14 5LB, UK.

Cheque

Please send your cheque, made payable to RL360 Insurance Company Limited to RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Your cheque must come from the bank account you have detailed in Section 03 - Plan Requirements.

Please note that GBP cheques can take up to five working days to clear. Other currency cheques may take considerably longer to clear.

AUTHORISATION TO PAY A FINANCIAL ADVISER FEE

Please complete in BLOCK capitals throughout. Who is this form for?		
	(daviser company and address)	
RL360 adviser number:		
We can only accept instructions that have been signed by all applicants.		
Important notes		
 As this instruction will result in a deduction from your plan to meet the f deduction may form part of any deferred tax allowance for your country determine whether this could affect you. 		
2. RL360 cannot be held responsible for any future tax liability that may ac where it later transpires that it should have been charged. The adviser is are providing is subject to any additional taxes.		
3. This fee is calculated and paid each quarter from the plan anniversary.		
4. The value of any additional payments made to the original plan will be ${\bf tr}$	reated as part of its value when the fees are calculated.	
5. This agreement shall be subject to, and interpreted in, accordance with t	the laws of the Isle of Man.	
6. I confirm that I will inform RL360 in writing should I wish to terminate $\boldsymbol{\mu}$	payment of this fee.	
Applicant(s) to complete		
I authorise RL360 to pay the following fee to my financial adviser:		
Financial adviser fee		
% per year, paid quarterly in arrears as percentage of my plan	value (the fee should not be more than 1.0% per year).	
Note: where this fee is used in conjunction with an investment adviser fe per year.	ee, the two fees combined cannot be more than 1.5%	
Plan application dated (dd/mm/yyyy)		
Applicant 1	Applicant 2	
Signed		
Full name		
Date (dd/mm/yyyy)		

INVESTMENT ADVISER APPOINTMENT

Who is this form for?

This form is for applicants who wish to appoint an investment adviser to their plan. Investment advisers may act on a non-discretionary or discretionary basis. This is your choice and an agreement that you must make with your investment adviser.

Completing this form

By completing this form you will be informing RL360 about the appointment of a company to act as an investment adviser to your plan. They will have the power to place dealing instructions on your behalf.

We can only accept written instructions that have been signed by all owners, trustees or authorised signatories.

Please complete in BLOCK capitals throughout.

SECTION 1 INVESTMENT ADVISER APPOINTMENT

Applicant(s) to complete I wish to appoint		
Investment adviser company name		
to act in the capacity of an investment adviser to my plan		
Application dated (dd/mm/yyyy)		
I understand that my investment adviser will be able to act on my behalf, subject to the terms and conditions set out in Section 5 below, to advise on and change the funds to which the value of my plan is linked. I authorise RL360 Insurance Company Limited (RL360) to release all relevant information relating to my plan to my investment adviser when requested.		
I understand that RL360 is not responsible for any loss or liability incurred to my plan as a result of advice given, or negligence by, my appointed investment adviser. I also understand that RL360 is not responsible for the performance of any funds linked to my plan.		
I confirm that all communications in relation to dealing instructions should be directed to my investment adviser.		
Please confirm on what basis you wish your investment adviser to be appointed, non-discretionary or discretionary, by ticking the appropriate box below.		
I confirm that my investment adviser will be acting on a non-discretionary basis. Dealing instructions may only be forwarded to RL360 after my investment adviser has consulted me. My investment adviser has confirmed to me that they have the necessary regulatory authorisations in order to perform this role. I understand that RL360 is not required to obtain proof that my investment adviser has consulted with me, prior to acting on any instructions received.		
I confirm that my investment adviser will be acting on a discretionary basis. Dealing instructions may be forwarded to RL360 without my consent. My investment adviser has confirmed to me that they have the necessary regulatory authorisations in order to perform this role.		
I authorise RL360 to take a withdrawal from my plan in line with the following:		
A percentage		
% per year, taken quarterly as a percentage of my plan value (the fee should not be more than 1.0% per year).		
Note: where this fee is used in conjunction with a financial adviser fee, the two fees combined cannot be more than 1.5% per year.		

I confirm that should I change my investment adviser, or bring this agreement to an end in the future, I agree to inform RL360 in writing (originals only), immediately.

I am aware that for as long as I have an appointed investment adviser I will be unable to access online dealing facilities.

SECTION 1 INVESTMENT ADVISER APPOINTMENT CONTINUED

I acknowledge that RL360 has the right to reject the appointment of my investment adviser at its discretion.

I agree that I am solely responsible for the appointment of an investment adviser to my plan and that I am also responsible for ensuring that they have the appropriate experience, and/or qualifications and permissions to provide me with investment advice.

I acknowledge that RL360 is not liable for the performance or conduct of my investment adviser, or for ensuring that they hold and continue to maintain any regulatory or legal permissions required to provide investment advice.

	Applicant i	Applicant 2
Signed		
Full name		
Date (dd/mm/yyyy)		
SECTION 2 INVESTMENT	ADVISER DETAILS AND CONDITIONS	
Investment adviser to complete		
Full name		
Online services username (if registered)		
Company name		
RL360 adviser number		
Investment adviser company address		
Email address		
Telephone number		

If you do not have Terms of Business with RL360, please contact your Regional Sales Manager before submitting this form.

In accepting the appointment of investment adviser to the above stated plan, I agree to the following terms and conditions:

- 1. All instructions relating to the purchase, sale or switching of funds will be in respect of the range agreed by RL360 as being eligible for the plan.
- 2. All instructions should be provided in a format as agreed by RL360.
- 3. RL360 will purchase, sell or switch funds at the relevant market price as available at the time of placing an instruction.
- 4. RL360 has the right to accept or reject any instruction from the investment adviser at its own discretion.
- 5. The investment adviser must maintain such authorisation as is necessary to act as an investment adviser under the legislation and regulation in the country in which advice is given.
- 6. RL360 and the plan owner cannot be held responsible for any future tax liability, that may accrue to the investment adviser, as a result of a failure to levy tax where it later transpires that it should have been charged. The investment adviser is responsible for deciding whether or not the service they are providing is subject to the levy of any additional taxes.

SECTION 2 INVESTMENT ADVISER DETAILS AND CONDITIONS CONTINUED

- 7. RL360 has the right to remove the investment adviser from the plan, without specifying a reason, and on giving one month's written notice to the plan owner and the investment adviser.
- 8. The investment adviser may resign their appointment by giving written notice to the plan owner and RL360. RL360 will remove the investment adviser from the plan as soon as the notification is received.
- 9. The appointment will cease immediately upon written notification of bankruptcy, dissolution or insolvency of the investment adviser, or any composition with creditors, or if the investment adviser is in breach of any regulatory requirement, or it becomes illegal for the investment adviser to act in this capacity.
- 10. This appointment and agreement shall be subject to, and interpreted in, accordance with the laws of the Isle of Man.
- 11. RL360 will not be liable in the event that the appointed investment adviser or the plan owner fails to notify RL360 of any material factor affecting the above.

Please submit a current certified copy of your company's Authorised Signatory list with this form. If you have an additional list for persons authorised to sign dealing instructions, please also submit a certified copy with this form.

If your company is not regulated in the UK, Isle of Man, Channel Islands, Hong Kong or Gibraltar, please provide identification and address verification for each person on the Authorised Signatory list.

	Investment adviser		
Signed			
Date (dd/mm/yyyy)			

RL360 Insurance Company Limited

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E csc@rl360.com

Registered Office: International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles. Registered in the Isle of Man number 053002C. RL360 Insurance Company Limited is authorised by the Isle of Man Financial Services Authority.

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HELPING YOU TO PROTECT AND GROW YOUR WEALTH

