



# Offshore Bond Application for Individual/Joint Use Including Additional Investments

Provided by RL360 Insurance Company Limited (RL360)





We're currently rebranding from Novia to Wealthtime. You'll notice that some of our products and services still use the name Novia while we're transitioning over to the new name. So don't worry if you see both Wealthtime and Novia names in our documents. Wealthtime is a trading name of Novia Financial plc.

Please indicate where applicable and ensure that the declaration is signed. You can sign this form digitally. Once completed, simply log in to Adviser Zone and send it to us via secure email. If you don't have access to our selected electronic signature providers, please sign the declaration using a blue or black pen and scan the form before sending it to us by secure email. Alternatively, you can send the form by post to Wealthtime Client Services, PO Box 4328, Bath, BA1 0LR.

Copies of the terms and conditions are available on request, as is a copy of your completed application form(s). The contract could be invalidated by any failure to disclose facts which might influence RL360 Insurance Company Limited's (RL360) assessment of this application. If you have any doubt whether a fact is relevant, you should disclose it. Please ensure that appropriate supporting documents are forwarded in all cases.

#### **Guidance Notes**

#### Verification of your Identity and Address

To satisfy the Isle of Man's Insurance (Anti-Money Laundering) Regulations 2008, RL360 are required to check the identity and address of each applicant. For your convenience, a complete checklist of all requirements can be found at the back of this application form.

#### **Guidelines for Satisfactory Evidence**

#### Verification of Identity

Documents that will be accepted as satisfactory evidence of identity are:

- · A valid 'full' passport
- A national ID card (carrying a photograph)
- Where the above documents are not available, two formal documents with appropriate reference numbers will be considered.

#### Verification of Residential Address

To confirm your residential address details, the following documentation is acceptable:

- A utility, rates, or council tax bill. Unfortunately, mobile telephone bills are not acceptable as evidence of address.
- · An entry in a local telephone directory.
- · An extract from the official register of electors.
- · A current driving licence (both photographic and printed sections, if applicable).
- A tax assessment document.
- An account statement from a bank or bank credit card. Statements featuring a 'care of'
   or accommodation address are not acceptable. Non-bank cards, such as store cards are not acceptable.
- · Proof of ownership or rental of the residential address.
- Proof of payment for a PO Box service (which must also show the residential address),
   where the PO Box shown is also your correspondence address.
- A mortgage statement.

Documents for identity and address verification must be the most recent available.



#### **Suitably Certified Copy Documentation**

We can accept certification of copy documents by Advisers (IFAs) who hold Terms of Business with us and, where appropriate, have been granted suitable certifier status. Please consult your Adviser to determine if they can certify your documents.

Where suitable certifier status is not held, we will only accept certification by one of the following suitable certifiers:

- Notary public (or equivalent)
- Lawyer
- A formally appointed member of the judiciary
- An employee of RL360
- · A commissioner for oaths

#### The certifier must:

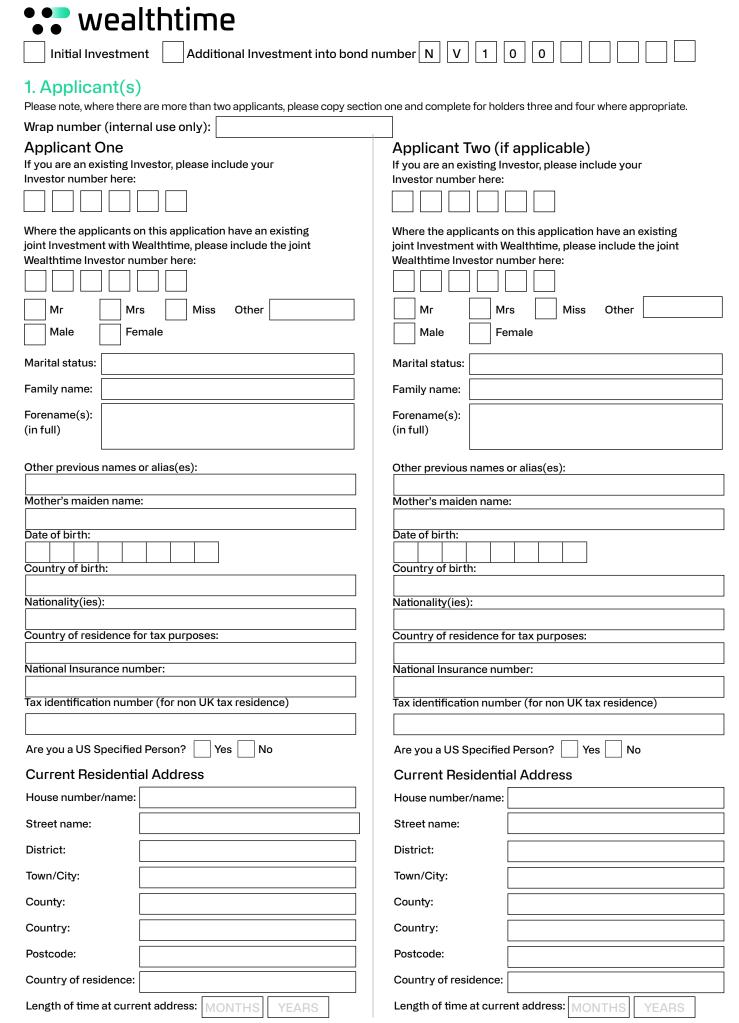
- · Add the statement 'Certified as a true copy taken from the original'
- · Sign and date the copy document on all pages
- · Print his/her name clearly in capitals underneath the signature
- · Record the capacity or position in which they are certifying the document
- · Add their company/official stamp or seal

The documents which RL360 receives must contain the original certification stamp. Any costs associated with certifying documentation are at your own expense. We regret that we are unable to accept copies of documents certified by other unconnected parties unless they are one of the persons listed above.

#### **US Specified Person**

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

Failure to provide any of the information requested in this application may delay Investment and acceptance.





### 1. Applicant(s) (Continued)

First Applicant	Second Applicant (If Applicable)		
Previous Address (if Less Than Three Years)	Iress (if Less Than Three Years)  Previous Address (if Less Than Three Years)		
House number/name:	House number/name:		
Street name:	Street name:		
District:	District:		
Town/City:	Town/City:		
County:	County:		
Country:	Country:		
Postcode:	Postcode:		
Contact Details	Contact Details		
Telephone:	Telephone:		
(inc. area code)	(inc. area code)		
Email:	Email:		
Address for Correspondence  Please note that any correspondence we are required to send y instruction and apply to future correspondence for all Product			
House number/name or Adviser firm details:			
Street name:			
District:			
Town/City:			
County:			
Country:	Postcode:		
If no correspondence address is supplied, we will use the residence is the correspondence address  Adviser firm Self Friend/Family Other (ple	ential address of applicant one. ease specify)		
Adviser illiii Seir Friend/Family Other (pi	case specify)		



### 1. Applicant(s) (Continued)

First Applicant	Second Applicant
Employment Details	Employment Details
Profession/main occupation:	Profession/main occupation:
Where you are retired, please confirm your previous occupation, employer, and date of retirement:  Annual salary this year: £  (including any bonuses)	Where you are retired, please confirm your previous occupation, employer, and date of retirement:  Annual salary this year:  (including any bonuses)
Employer's Address	Employer's Address
House number/name:	House number/name:
Street name:	Street name:
District:	District:
Town/City:	Town/City:
County:	County:
Country:	Country:
Postcode:	Postcode:
Employer's telephone number: (inc. area code)	Employer's telephone number: (inc. area code)
Any other occupation for which you are paid:	Any other occupation for which you are paid:



### 2. Lives Assured

Is the first applicant to be a life assured?	Is the second applicant (if applicable) to be a life assured?
Yes No	Yes No
Are there to be any other lives assured?	Are there to be any other lives assured?
Yes No	Yes No
If you wish to have additional lives assured on the Novia Offshore Bond, you can have up to ten lives assured in total, inclusive of applicant(s). The sole or youngest life assured must be age 75 or younger at policy commencement.	If you wish to have additional lives assured on the Novia Offshore Bond, you can have up to ten lives assured in total, inclusive of applicant(s). The sole or youngest life assured must be age 75 or younger at policy commencement.
Additional Life Assured	Additional Life Assured
Mr Mrs Other	Mr Mrs Other
Male Female	Male Female
Last name:	Last name:
First name(s):	First name(s):
(in full)	(in full)
Date of birth:	Date of birth:
Country of birth:	Country of birth:
Nationality(ies):	Nationality(ies):
Current Residential Address	Current Residential Address
House number/name:	House number/name:
Street name:	Street name:
District:	District:
Town/City:	Town/City:
County:	County:
Country:	Country:
Postcode:	Postcode:
Country of residence:	Country of residence:
Telephone:	Telephone:
(inc. area code)	(inc. area code)
(	(

Please copy this page to add further lives assured.



### 3. Payment and Policy Instructions

The payment currency to	or your Novia Offshore Bond is	S GBP only.		
Investment amount GE	ВР	Minimum initial Investment	is GBP 50,000	
· · · · · · · · · · · · · · · · · ·	· · · ·	•	on an account held in the name of one or vices, PO Box 4328, Bath, BA1 0LR.	or more of the
is the same as it appears RL360 policy number or,	on this application and, if you	are an existing client, please in your National Insurance num	w. Please make sure your name(s) on the nolude both your Wealthtime Investor naber. Please ensure this application is furansfer any monies.	umber and your
Bank: Citibank N	A			
Account name: RL360 N Sort Code: 18-50-08 Acc	count number: 13142000	DF00040440000		
Swift code: CITIGB2L IB/	AN number: IBAN GB09CITI18	3500813142000		
Multiple Policy Fa	cility (for Initial Invest	ments Only)		
Number of sub-policies r 100 sub-policies will be is	required (minim ssued. Any additional Investme		note that in the absence of contrary inst sting policies.	ructions,
4. Investment li	nstructions			
	r Initial Investments O ats should be detailed in 4b	_		
not available, we will buy units/shares. All purchas	income units/shares. Where i	ncome units/shares have bee eared funds. Please ensure th	re accumulation units/shares have beer n stated but are not available, we will bu at your choices total 100%, otherwise y	uy accumulation
Name of Investment*			Inc/Acc	%
Cash (min 2%) **				2
Please ensure you only c for this Product Wrapper.	hoose Investments that are pe	ermissible	Total	100%

<sup>\*</sup>Please write the name in full as listed on our Investments List. The list and fact sheets can be found at <a href="https://www.wealthtime.com">www.wealthtime.com</a>

<sup>\*\*</sup>We receive interest on the Cash held within your account. The amount we receive will vary as interest rates rise and fall. We keep some of this interest and pass the rest on to you. Visit our website for the latest interest rates and for more on what this means for you: wealthtime.com/investors/documents/wealthtime-platform-cash-account



Do you wish to make the Investment choice above your default sele	ection for future Investments?	Yes No
If yes, and you wish to have periodic rebalancing, please select the	preferred frequency: Qua	arterly Annually
By completing this application, you authorise Wealthtime to accept amendment and removal of rebalancing from the Adviser and/or fir rebalancing process, please read the terms and conditions.		
4b. Instructions for Additional Investments Only (Initial Investments should be detailed in 4a) Please choose the appropriate Investment and rebalancing options for this	Investment.	
Option 1: Invest into the Current Default Selection of In (please note that any existing rebalancing Instructions will re		t Wгаррег
I/We wish to invest this immediately into my/our default selecti	on.	
or		
I/We have an existing rebalancing instruction and wish to inves	t in Cash awaiting the next reba	lancing date.
Unless you tell us otherwise, we automatically buy accumulation un stated but are not available, we will buy income units/shares. Where available, we will buy accumulation units/shares. All purchases are syour choices total 100%, otherwise your Investment will be held in y	income units/shares have been subject to sufficient cleared fund	stated but are not ls. Please ensure that
Name of Investment*	Inc/Acc	%
Cash (min 2%) **		2
Please ensure you only choose Investments that are permissible for this Product Wrapper.	Total	100%

\*Please write the name in full as listed on our Investments List. The list and fact sheets can be found at <a href="www.wealthtime.com">www.wealthtime.com</a>.

\*\*We receive interest on the Cash held within your account. The amount we receive will vary as interest rates rise and fall. We keep some of this interest and pass the rest on to you. Visit our website for the latest interest rates and for more on what this means for you: wealthtime. com/investors/documents/wealthtime-platform-cash-account

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Do you wish to make the Investment choice above your default selection for future Investments?				
Please do not apply rebalancing				
ог				
Please apply rebalancing using my default Investment choice				
Quarterly Annually				
ог				
I/We wish to make a new Investment choice as my default selection for	any future Investments and apply re	ebalancing		
Quarterly Annually, using the Investment choices detailed	below:			
Name of Investment*	Inc/Acc	%		
Cash (min 2%) **		2		
	Total	100%		

\*Please write the names in full as listed on our Investments List. The list and fact sheets can be found at www.wealthtime.com.

By completing this application, you authorise Wealthtime to accept instruction regarding the future application, amendment and removal of rebalancing from the Adviser and/or firm named in Section 11. For a full explanation of the rebalancing process, please read the Terms and Conditions.

Please be aware that Wealthtime will not include non-daily dealing funds in the rebalancing process. Where you wish to amend the level of Investment in these Investment types, you will need to action the trade and place the proceeds into Cash or any Investment included in the rebalancing process. The rebalancing instruction will then be applied at the next scheduled rebalancing date. Any rebalancing that takes place before you action your trades will be proportionate across Investments that can be rebalanced, ie. the value and split of listed Investment types will be excluded from rebalancing calculations.

\*\*We receive interest on the Cash held within your account. The amount we receive will vary as interest rates rise and fall. We keep some of this interest and pass the rest on to you. Visit our website for the latest interest rates and for more on what this means for you: wealthtime.com/investors/documents/wealthtime-platform-cash-account



Building society client number:

### Individual/Joint Offshore Bond Application

### 5. Regular Withdrawal Instructions

Please complete this section if you would like to receive a Regular Withdrawal. If you do not wish to set up a Regular Withdrawal at this stage, please continue with section six.

Payment to or from third parties are not usually acceptable.

Withdrawals in excess of 5% of your Investments made (including additional Investments) from a Novia Offshore Bond in any policy year will give rise to a chargeable event and this may result in a tax charge (unless the 5% allowance from previous years has not been used).				
It may reduce your tax bill to Cash in a whole number of sub-policies. Please consult your Adviser for guidance.				
The above information is based on our current understanding of HM Revenue and Customs law and practice which is subject to change. Amount* (please note that the minimum Regular Withdrawal amount is £200)				
GBP				
Start date (mm/yy)**				
*Regular Withdrawals have the option for a fixed amount or % but not both  ** Please note that the start month cannot be more than 12 months from the date of application				
Do you wish to increase your Regular Withdrawals? (Please select one option only)				
No increase Increase by the Retail Price Index (RPI) Increase by a fixed % (1%-5% p.a.)				
6. Bank Details (Initial Investments Only)				
Please provide details of your bank/building society current account. We will use this account to make any payments to you.				
Please complete this section even if you are not requesting withdrawal payments at this time.				
Name of bank/building society:				
Account holder's name(s):				
Branch sort code:				
Account number:				

Payments to building society accounts may take up to 10 working days longer than payments to bank accounts.

Please contact your Adviser or Wealthtime client services on 0845 680 8000 if you wish to change your bank details for an additional Investment.



#### 7. Source of Funds and Wealth

In order for RL360 to comply with its obligations under the Isle of Man's Insurance (Anti-Money Laundering) Regulation 2008, the following information must be provided by all applicants.

All questions must be answered.

#### Source of Funds

Please provide the details of the bank account from which you intend to fund the payment of your policy.

Name of Bank/Building Society:	
Branch:	
Street name:	
District:	
Town/City:	
County:	
Country:	
Postcode:	
Account name:	
Account number:	
or  Branch sort code (For UK GBP Pa	ayments only)
IBAN (All non-GBP accounts):	
Account held for: MONTHS	YEARS
ОГ	
Account number (GBP UK Bank	only):



#### Source of Wealth

The Insurance (Anti-Money Laundering) Regulations 2008 requires all Isle of Man life companies to "make enquiries as to how an applicant has acquired the monies to be used as premium for, or contribution to, a policy." This reflects the Isle of Man's commitment to maintaining 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 comply with current legislation and guidance by risk rating each client as representing Standard, Higher or High Risk. This depends on the product they are applying for, the jurisdiction they are based in, and the jurisdiction where the payment is to be transferred from. Business submitted from a UK source currently falls under Standard Risk and so no documentary evidence is required for a source of funds.

Full details on the source of wealth procedures can be obtained from your Financial Adviser or can be downloaded from <a href="www.rl360wrap.com">www.rl360wrap.com</a>
You must complete the annual salary question in full, in all cases and for both applicants as applicable. You must also complete all other relevant questions within this section.

First Applicant Annual Salary Plus	Bonuses	Second Applicant (if Applicable) Annual Salary Plus Bonuses	
	ll us your income details below me section on the next page.	If you are retired, please tell us your income details below in the Other unearned income section on the next page.	
Income this year: (include currency)		Income this year: (include currency)	
Income last year: (include currency)		Income last year: (include currency)	
Occupation:		Occupation:	
Employer's company name:		Employer's company name:	
Nature of business:		Nature of business:	
First Applicant Other Unearned Inc	come	Second Applicant Other Unearned Income	
Amount received (include currency):		Amount received (include currency):	
Received from:		Received from:	
Date received:		Date received:	
If you are retired please tell previous salary, employer, a	us your previous occupation, 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):	
Employer's Company name:		Employer's Company name:	
Date retired:		Date retired:	

Please confirm your source of wealth for this application by completing the relevant boxes on the following page.



### 7. Source of Funds and Wealth (Continued)

First Applicant Savings	Second Applicant Savings (if Applicable)				
Amount received: (include currency)	Amount received: (include currency)				
Bank where savings were held:	Bank where savings were held:				
How were the savings accumulated?:	How were the savings accumulated?:				
Pension Transfer	Pension Transfer				
Amount received (include currency):	Amount received (include currency):				
Received from:	Received from:				
Date received:	Date received:				
Property or Asset Sale	Property or Asset Sale				
Amount received	Amount received				
(include currency):	(include currency):				
Address of property sold or asset type:	Address of property sold or asset type:				
How long held:	How long held:				
Date of sale:	Date of sale:				
Company Profits	Company Profits				
Profits this year: (include currency)	Profits this year: (include currency)				
Profits last year:	Profits last year:				
(include currency)	(include currency)				
Industry:	Industry:				



### 7. Source of Funds and Wealth (Continued)

First Applicant Company Sale	Second Applicant (if Applicable) Company Sale		
Profits this year (include currency):	Profits this year (include currency):		
Company name:	Company name:		
Company industry:  Date received:	Company industry:  Date received:		
Other (such as lottery or betting win, gift or inheritance)  Amount received (include currency):  Source:  Date received:	Other (such as lottery or betting win, gift or inheritance)  Amount received (include currency):  Source:  Date received:		
of the 5% tax deferred allowance.  ** The maximum ongoing Adviser Charge is 2% pa of the policy value a application, the maximum will be applied.	at the time of taking the charge. If a higher figure is recorded on this		
9. Adviser Charge - Switch			
Switch (maximum 3%) %			
I/We authorise Wealthtime to accept Switch Instructions from the Adv	viser and/or firm named in Section 11 of this form and agree to the fund		

I/We authorise Wealthtime to accept Switch Instructions from the Adviser and/or firm named in Section 11 of this form and agree to the func Switch Charges as explained in the terms and conditions. I/We agree my Adviser may retain a charge for each Switch as agreed under the terms of my contract with my Adviser.

This instruction will replace any previous instruction made and will become the default for any future Switches unless changed by a subsequent application. If a Switch Charge has not been stated in a previous application and this section has not been completed, a charge of 0% will apply.



#### 10. Declaration (for All Applicants to Complete)

The Novia Offshore Bond literature, including the key features document and terms and conditions, form the basis of the contract you are applying for. For your own protection, you should read them carefully, along with the declarations below, before completing the application process. If you do not fully understand any point, please seek clarification from your Adviser.

- If I/ we sign this declaration by electronic signature, I/we confirm that this method of signature is my/our agreement to be bound as if signed by my/our manuscript signatures.
- I/We apply for a Novia Offshore Bond, provided by RL360 and agree to be bound by the Novia Offshore Bond literature.
- · I/We confirm that, to the best of my/our knowledge and belief, all of the information supplied on this form is true and complete.
- I/We appoint (name of Adviser) as my/our agent. RL360 is authorised by me/us to disclose all information relating to my/our policy to my/our agent. I/We shall notify RL360 in writing if there is any change.
- I am/We are not resident in the United Statest and confirm that to the best of my/our knowledge and belief, I am/we are not subject to any legislation which would make such an Investment unlawful.
- I am/We are not a citizen of the United States†.
- I/We will advise RL360 in writing immediately on changes in the residence or citizenship.

Politically Exposed Persons	
A politically exposed person ('PEP') is a person entrusted with prominent public functions or their immediate family members or persons are known to be close associates of such persons. Examples of PEPs include political figures, members of the judiciary, diplomatic service officers, managers and supervisors of state-owned enterprises and senior ranking military officers. Please add the names of any PEPs associated with this application in the box below.	

Where this box is left blank, you are confirming that no PEP's are associated with this policy.

#### **Data Protection Act**

Where you see 'we' or 'us' this means Novia Financial plc (trading as Wealthtime). This form collects your personal data. We require your personal data so we can provide you with services relating to the performance of your contract. 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 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 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.

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

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

Our full privacy statement can be viewed at www.rl360.com/privacy or can be obtained by requesting a copy from our data protection officer.



and the application form was signed in (give country):    First Applicant   Second Applicant (if Applicable)	I/We confirm that advice lead	ding to the application was received in (give c	ountry):		
First Applicant  Second Applicant (if Applicable)  Signature:  Date:  Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Da					
Signature:  Date:  Date:  Date:  Date:  Date:  Important Note: Copies of the terms and conditions are available on request, as is a copy of your completed application. The contract could be invalidated by any failure to disclose facts which might influence RL360's assessment of this application.  If you have any doubt as to whether a fact is relevant, you should disclose it. RL360 regrets that it is unable to accept applications where the advice is received (whether by letter, fax, email, telephone or in person) or the application form is signed in the United States.†  **United States means the United States of America, its territories and possessions, any state of the United States and the District of Columbia.  **11. Adviser's Details and Declaration*  Adviser's name:  Your RL360 agent number:  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:	and the application form was	s signed in (give country):			
Signature:  Date:  Date:  Date:  Date:  Important Note: Copies of the terms and conditions are available on request, as is a copy of your completed application. The contract could be invalidated by any failure to disclose facts which might influence RL360's assessment of this application.  If you have any doubt as to whether a fact is relevant, you should disclose it. RL360 regrets that it is unable to accept applications where the advice is received (whether by letter, fax, email, telephone or in person) or the application form is signed in the United States.†  **United States means the United States of America, its territories and possessions, any state of the United States and the District of Columbia.  **11. Adviser's Details and Declaration*  Adviser's name:  **Your RL360 agent number:*  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:					
Date:  Date:  Date:  Important Note: Copies of the terms and conditions are available on request, as is a copy of your completed application. The contract could be invalidated by any failure to disclose facts which might influence RL360's assessment of this application.  If you have any doubt as to whether a fact is relevant, you should disclose it. RL360 regrets that it is unable to accept applications where the advice is received (whether by letter, fax, email, telephone or in person) or the application form is signed in the United States.¹  **United States means the United States of America, its territories and possessions, any state of the United States and the District of Columbia.  **11. Adviser's Details and Declaration*  Adviser's name:  **Your RL360 agent number:*  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:	First Applicant		Second	Applicant (if Applicable)	
Important Note: Copies of the terms and conditions are available on request, as is a copy of your completed application. The contract could be invalidated by any failure to disclose facts which might influence RL360's assessment of this application.  If you have any doubt as to whether a fact is relevant, you should disclose it. RL360 regrets that it is unable to accept applications where the advice is received (whether by letter, fax, email, telephone or in person) or the application form is signed in the United States.†  *United States means the United States of America, its territories and possessions, any state of the United States and the District of Columbia.  **11. Adviser's Details and Declaration**  Adviser's name:  Your RL360 agent number:  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:	Signature:		Signature:		
Important Note: Copies of the terms and conditions are available on request, as is a copy of your completed application. The contract could be invalidated by any failure to disclose facts which might influence RL360's assessment of this application.  If you have any doubt as to whether a fact is relevant, you should disclose it. RL360 regrets that it is unable to accept applications where the advice is received (whether by letter, fax, email, telephone or in person) or the application form is signed in the United States.†  *United States means the United States of America, its territories and possessions, any state of the United States and the District of Columbia.  **11. Adviser's Details and Declaration**  Adviser's name:  Your RL360 agent number:  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:					
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of Columbia.  11. Adviser's Details and Declaration  Adviser's name:  Your RL360 agent number:  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:	-	· <del>-</del>	_	• • • •	
Adviser's name:  Your RL360 agent number:  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:		nited States of America, its territories and poss	sessions, any st	tate of the United States and the District	
Your RL360 agent number:  Adviser's stamp:  Name of regulatory or authorising body eg. FCA:	11. Adviser's Details and Declaration				
Adviser's stamp:  Name of regulatory or authorising body eg. FCA:	Adviser's name:				
Name of regulatory or authorising body eg. FCA:	Your RL360 agent number:				
authorising body eg. FCA:	Adviser's stamp:				
authorising body eg. FCA:					
authorising body eg. FCA:					
	Email address:				

#### **Data Protection Act**

In accordance with the Isle of Man's Data Protection legislation by signing this form in the space indicated, you consent to us using the information provided, which may include sensitive data such as medical records, for the following purposes:

- Administration purposes.
- · Crime prevention and the prosecution of offenders.
- Market research and statistical purposes.



The information you have provided may be shared with other companies outside of RL360, including our reinsurers and financial intermediaries or agents acting on your behalf. It may be transferred outside the Isle of Man and we may be obliged to disclose it to our regulator and to others as demanded by law.

The Isle of Man's Data Protection legislation entitles you to obtain a copy of the information we hold on you.

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 <a href="mailto:dpo@rl360.com">dpo@rl360.com</a>. 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.

For further information please write to:

Data Protection Officer, RL360, International House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Signature:		
Name:		
Company:		
Date:		
	the checklist on page 17 to ensure that you have provid mation requested in this application may result in a del	ed all the required information. Please note that a failure to provide ay in Investment and acceptance.
12. Check	dist	
	that the following information/documentation accompa ide all relevant information will result in a delay to this a	• •
General Rec	quirements for All Applicants	Please indicate if attached
'Novia Financia	eque, please make the cheque payable to al plc'. Note that cheques can take 5- 10 o clear, and this will delay policy issues.	
Identificatio	n Requirements	
•	tional ID card (bearing a photograph of the wo other formal documents with appropriate bers.	
	ation, eg an acceptable bank statement, tement or utility bill.	
If applicable, re	elevant source of funds evidence as ction seven.	

Please note that failure to provide any of the information requested in this application may result in a delay in Investment and acceptance. Some of those requirements are necessary under the Isle of Man Government Financial Services Authority Insurance (Anti-Money Laundering) Regulations, 2008.

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