ADDITIONAL PAYMENT FORM FOR CORPORATE TRUSTEE OWNERS

Please complete this form in BLOCK CAPITALS throughout.

Individual plan owners must complete Additional Payment form - ref. RS02.

Company and Individual Trustee plan owners must complete Additional Payment form - ref. RS04.

You can download these forms from our website www.rl360.com.

Once you have completed and signed the form, you should send it along with all requested additional information to:

Email: newbusiness@rl360.com

or alternatively post it to:

New Business Team
RL360
International House
Cooil Road
Douglas
Isle of Man
IM2 2SP
British Isles

01 PLAN DETAILS

Plan reference

Name

Global Intermediary Identification Number (FATCA GIIN)

Do you want to update your contact/address details as part of this application? ☐ Yes ☐ No

If yes then please provide new details in Section 04 - Additional Information.

Online services
If you haven't yet registered for online access to your plan but would like to, please download our agreement and registration forms from our website – www.rl360.com.

RL360

02 PAYMENT DETAILS

You can use this form to increase regular payments and/or add a lump sum payment to your plan. Use the tick boxes to indicate which options you require.

☐ **Regular payment increase**

Minimum payment increase (per month)			
GBP	50	AUD	90
EUR	60	HKD	500
CHF	65	JPY	7,750
USD	70		

Current payment

Payment increase

Total payment

Establishment period (months)

Your plan currency, frequency and method of payment will remain unchanged.

Fund selection

Your payment increase will be invested in-line with your current fund selection.

If you wish to amend your current fund selection you will be required to complete a fund switch request form.

☐ **Additional lump sum**

Minimum lump sum payment			
GBP	5,000	AUD	9,000
EUR	6,000	HKD	50,000
CHF	6,500	JPY	775,000
USD	7,000		

Lump sum

Payment option ☐ Telegraphic transfer

Please note: RL360 no longer accepts payments by cheque. Payments must be made by electronic transfer.

Please confirm the details of the bank that you will be making payment from.

If you want to use a Currency Exchange House to transfer your payment to us, please ensure that it has been approved by RL360 first. Please also provide your bank account details below from where the payment originates, along with a full audit trail 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 payments)
SWIFT code must be either 8 or 11 digits

OR Bank sort code - - (for UK GBP payments only)

IBAN/Account number
(all non-GBP accounts)

OR Account number
(GBP UK Bank only)

Account held for years months

02 PAYMENT DETAILS CONTINUED

If the lump sum is to be paid in tranches, please confirm why

Fund selection (required)
We will invest your lump sum only as per the fund selection provided in the table below:

ISIN	Fund name	Currency	Percentage of payment
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%
			100%

03 SOURCE OF FUNDS

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 details in full, in all cases, and for both Settlors as applicable.

	Settlor 1	Settlor 2
Annual salary plus bonuses		
Annual salary this year (include currency)		
Bonuses this year (include currency)		
Annual salary last year (include currency)		
Bonuses last year (include currency)		

03 SOURCE OF FUNDS CONTINUED

Employment status	☐ Employed Full Time	☐ Retired	☐ Employed Full Time	☐ Retired
	☐ Employed Part Time	☐ Student	☐ Employed Part Time	☐ Student
	☐ Self Employed	☐ Homemaker	☐ Self Employed	☐ Homemaker
	☐ Unemployed		☐ Unemployed	
Employment role	☐ Employee	☐ Key Controller	☐ Employee	☐ Key Controller
	☐ Business Owner	☐ Sole Trader	☐ Business Owner	☐ Sole Trader
Occupation				
Employer's company name				
Country of employment				
If available company website				
Nature of business				

Other unearned income

Amount received (include currency)		
Received from		
Date received (dd/mm/yyyy)	☐☐ ☐☐ ☐☐☐☐	☐☐ ☐☐ ☐☐☐☐

If you intend to fund your plan from another source, please indicate which one from the list below for each Settlor and provide the relevant information requested in Section 04 – Additional Information.

Source of funds	Settlor 1	Settlor 2	Information required
Savings	☐	☐	Amount* | Bank where savings were held | How and for how long were the savings accumulated
Property sale	☐	☐	Amount* | Address of property | How long held | Date of sale
Sale of asset	☐	☐	Amount* | Asset type | How long held | Date of sale
Company profits	☐	☐	Profits this year* | Profits last year* | Company name and industry
Company sale	☐	☐	Amount* | Company name and industry | Date of sale
Maturing investment	☐	☐	Amount* | From which company | Date of sale
Lottery/betting/casino	☐	☐	Amount* | Source of win | Date received
Compensation payment	☐	☐	Amount* | Reason for payment | Date received
Gift or Inheritance	☐	☐	Amount* | Relationship to benefactor | Reason for gift | Date received
Other	☐	☐	Amount* | Reason for payment | Date received

* Please include currency

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

04 ADDITIONAL INFORMATION

If you have no additional notes, please continue to Section 05 - Declaration.

05 DECLARATION

My application
I am aware that my payment increase and/or lump sum will be treated in line with the terms and conditions of my plan.

Illustration
I confirm that I have included an illustration with this Additional Payment Form.

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.

Key Information Document (KID)
I confirm that I have included a KID with this Additional Payment Form.

I understand that the KID sets out the details of my additional payment and the charges that will be deducted.

Availability
I confirm that to the best of my knowledge and belief, I am not subject to any legislation that would make my payment increase/ lump sum unlawful.

Investment
I am aware that RL360 is not responsible for the choice of funds within my plan.

I agree to RL360 acting on investment instructions received from me or my appointed adviser, and I will read all of the documentation issued by the investment manager for each fund.

Privacy policy
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 may be brought in relation to it.

Cancellation
I am aware that I have the right to cancel my additional payment 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 additional payment I will need to complete the Cancellation Notice and return it to RL360.

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

I confirm that this additional payment form was signed in (give country)

	Trustee 1/Authorised signatory	Trustee 2/Authorised signatory
Full name		
Signed		
Date (dd/mm/yyyy)		

	Trustee 3/Authorised signatory	Trustee 4/Authorised signatory
Full name		
Signed		
Date (dd/mm/yyyy)		

06 ADVISER DETAILS

This section is to be completed by your financial adviser.

The RL360 adviser number can be obtained from your regional office.

Company name	
RL360 Adviser number	
Financial adviser's stamp (if this does not state an address, please complete company address details too)	
Full name	
Online services username (if registered)	
Email address	
Signed	
Date (dd/mm/yyyy)	

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