# Personal Investment Management Service

**Application** 



This Application Form should be read in conjunction with the current Personal Investment Management Service Brochure and Key Features.

A copy of the completed form and the Policy *Terms and Conditions* are available on request. If there is any doubt as to the relevance of any fact it should be included in your application, as it is important that all information is fully disclosed. If more space is required please continue on a separate piece of paper and ensure it is signed and dated by each applicant.

Select Flexible Flexible	
Before you return this form, please indicate which sections of the application have been completed and which additions documents are enclosed.	ıl
Please tick	
Section 1 to be completed for Single/Joint applications	
Section 2 to be completed for Trustee applications	
Section 3 to be completed for Corporate trustee applications	
Section 4 to be completed for Corporate applications	
Section 5 to be completed in all cases	
Section 6 to be completed if applicable	
Section 7 to be completed in all cases (please remember to name the country where the application is signed)	
Section 8 to be completed in all cases	
Section 9 to be completed if applicable	
Section 10 to be completed if applicable	
Section 11 to be completed in all cases	
Section 12 to be completed in all cases	
Copy of personal illustration enclosed	
Bank instruction letter	
Health questionnaire required if PIMS Wealth Insurance is chosen	
Investment adviser appointment form (please refer to section 9)	
Additional information/special instructions	

Failure to provide all the relevant information and documentation may delay the acceptance of the application and any subsequent investment instructions contained therein.

# Section 1 Single/Joint applicant details

	Applicant 1	Applicant 2
Title:		
Surname:		
Forenames (in full):		
Residential address (in full):		
Postcode:		
Telephone:		
Country of residence:		
Nationality:		
Occupation (if retired please		
give details of last employment):		
Date of birth (dd/mm/yyyy):		
Sex:	Male Female	Male Female
Please insert existing policy numbers (if applicable):		
Correspondence address (in full) if different from above:		
Please give reasons why this address is to be used:		
All applicants must sign the	Declaration in section 11 and the following shoul	ld be submitted to support the application:
<ul> <li>full true certified copy of a</li> </ul>	a current passport or national identity card carryir	ng a photograph of the applicant(s), AND
utility, rates or local autho	the current residential address of the applicant(s) rity bill, entry from local telephone directory, extra essment or a mortgage statement). This evidence	act from electoral roll, current driving licence,
ection 2 Trustee	e(s) applicant details (non-corpo	rate trustee)
I am/We are* the current tru	stee(s) of the trust created on (dd/mm/yyyy):	
By the settlor(s) (insert name(s)):		
and confirm that (insert name(s)):		

Is/Are\* the beneficial owner(s) of the assets of the trust fund, and that; (see next page)

# Section 2 Trustee(s) applicant details (non-corporate trustee) continued

1. The trust name is:		
The correspondence		
address to be used is:		
Postcode:		
2. The nature and purpose of the trust is:		
3. That I/we* have the necess	ary powers to make the proposed investment	
4. That I/we* will advise Roya appropriate evidence of ide	ll London 360° in writing immediately of any chan entity will be required	nges of trustee(s) and I/we* understand that
5. All trustees must act unani	mously.	
Trustee(s) signatures		
	Trustee 1	Trustee 2
Title:		
Surname:		
Forenames (in full):		
Residential address (in full) (must be provided):		
Postcode:		
Signed:		
Date (dd/mm/yyyy):		
	Trustee 3	Trustee 4
Title:		
Surname:		
Forenames (in full):		
Residential address (in full) (must be provided):		
Postcode:		
Signed:		
Date (dd/mm/yyyy):		

### All trustees must sign the Declaration in section 11 and each of the following should be submitted to support your application:

- full true certified copy of a current passport or national identity card for each trustee carrying a photograph of the individual and proof of address. Evidence of current address must be no older than three months.
- · certified true copy of the trust deed and any subsequent deed(s) of appointment/retirement of trustees

charity or other beneficiary.

- if not detailed on the trust deed, full details of the settlor(s)/protector(s) dates of birth and current address (if the settlor is no longer living the trustees should provide the date of death).
- full details of all current named beneficiaries, including name, date of birth and current address (trustee(s) to provide).

Where the beneficiaries are not individuals, sufficient information should be provided to identify any class, corporate entity,

# Section 3 Corporate trustee(s) applicant details

Name of corporate trustee:		
	tors and authorised signatories will be immediate evidence of identity will be provided.	ly notified to Royal London 360° in writing and
Permanent registered office		
address (in full):		
Postcode:		
Correspondence address		
(in full) if different from above:		
Postcode:		
Directors/authorised signato	ries	
Please enclose certified copy	passports for at least two of the listed directors	one of whom must be an executive director
	Director 1	Director 2
Title:		
Surname:		
Forenames (in full):		
Residential address (in full):		
Postcode:		
Signed:		
Date (dd/mm/yyyy):		
T'11	Director 3	Director 4
Title:		
Surname:		
Forenames (in full):		
Residential address (in full):		
5		
Postcode:		
Signed:		
Date (dd/mm/yyyy):		

## Section 3 Corporate trustee(s) applicant details (continued)

I/We* confirm the following:		
That (insert name):		
Is/Are* the beneficial owner(s	) of the trust company.	
Royal London 360° is authoris	sed by the applicant to obtain a reference if req	uired from:
Name of bank:		
Address of bank:		
Postcode:		
Account name:		
Account number:		
Bank sort code:		
I am/We are* the current trus	tee(s) of the trust created on (dd/mm/yyyy):	
By the settlor(s) (Insert name(s)):		
The beneficial owner(s) of the assets of the trust fund are (Insert name(s)):		
The trust name is:		
The nature and purpose of the trust is:		
That I/we* have the necessary	y powers to make the proposed investment	
(including without prejudice t	o the generality of the foregoing instructions to	
withdrawals, or totally encash	rectors/authorised signatories, please provide	(number).
ii there are more than lour di	rectors, datiforised signatories, predse provide	details on a separate silect.

The required number of authorised signatories must also sign the Declaration in Section 11 and the following should be

provided to support your application:

- full true certified copy of a current passport or national identity card carrying a photograph for at least two directors one
  of whom should be an executive director and proof of address should be provided. Evidence of current address must be no
  older than three months.
- certified true copy of the trust deed and any subsequent deed(s) of appointment/retirement of trustees.
- if not detailed on the trust deed, dates of birth and current address of the settlor(s)/protector(s) (if the settlor is no longer living the trustees should provide the date of death).
- full details of all beneficiaries (including contingent beneficiaries, if any) including name, date of birth and current address (trustees to provide). Where the beneficiaries are not named, sufficient information should be provided to identify any class, corporate entity, charity or other beneficiary.
- true certified copy of the corporate trustee's certificate of incorporation.
- · evidence of the registered office of the corporate trustee.
- list of directors.
- · list of officers from whom Royal London 360° is to take instructions together with their specimen signatures.
- for private limited companies only verification of the identity of all shareholders holding 20 percent or more of the issued share capital as at the date of the application. If the holder of 20 per cent or more is a holding company, trust or nominee, further information may be required.

# Section 4 Corporate applicant details

to be completed if you are a	i corporate applicant. Corporate	e trustees snould complete section	on 3.
Are you a:	Public registered company	Private limited company	Unincorporated company
Name of company			
I/We* confirm that the beneficial owner(s) of the company's shares is/are* (Beneficial owner being any director/shareholder holding 20% or more of the issued share capital):			
Verification of identity, that submitted with this <i>Application</i>		d address verification for each of	the beneficial owners must be
At a meeting of the board of	directors held on the		
Date (dd/mm/yyyy):	at (loca	ation)	
It was agreed and resolved the	nat:		
1. The company has the cap	acity to enter into the contract a	pplied for	
<ul><li>(including without prejudice withdrawals, or totally end</li><li>3. All changes in directors are</li></ul>	ce to the generality of the foregoi	orised signatories of the company ring instructions to change underlying (number)  immediately notified to Royal Loned.	ng investments, make )
Royal London 360° is author	ised by the applicant to obtain a	reference if required from:	
Name of bank:			
Address of bank:			
Postcode:			
Account name:			
Account number:			
Bank sort code:			
Permanent registered office			
address (in full):			
Postcode:			
Correspondence address (in full) if different from			
above:			
Postcode:			

# Section 4 Corporate applicant details (continued)

### **Directors/authorised signatories**

Please enclose certified copy passports for at least two of the listed directors, one of whom must be an executive director.

	Director 1	Director 2
Title:		
Surname:		
Forenames (in full):		
Residential address (in full) (must be provided):		
Postcode:		
Position/Title:		
Signed:		
Date (dd/mm/yyyy):		
	Director 3	Director 4
Title:	Director 3	Director 4
Title: Surname:	Director 3	Director 4
	Director 3	Director 4
Surname:	Director 3	Director 4
Surname: Forenames (in full): Residential address (in full)	Director 3	Director 4
Surname: Forenames (in full): Residential address (in full) (must be provided):	Director 3	Director 4
Surname: Forenames (in full): Residential address (in full) (must be provided): Postcode:	Director 3	Director 4

If there are more than four directors/authorised signatories, please provide details on a separate sheet.

The required number of authorised signatories must also sign the Declaration in section 11 and the following should be provided to support your application:

- a full true certified copy of a current passport or national identity card carrying a photograph for at least two directors, one of whom should be an executive director, and proof of address should be provided. Evidence of current address must be no older than three months.
- a list of directors.
- a true certified copy of the certificate of incorporation.
- evidence of the registered office.
- a list of officers from whom Royal London 360° is to take instructions and specimen signatures.
- for private limited companies only verification of the identity of all shareholders holding 20 percent or more of the issued share capital as at the date of the application. If the holder of 20 per cent or more is a holding company, trust or nominee, further information may be required.
- where possible, a set of the latest annual report and accounts.
- for a public registered company only a copy of the board resolution providing authority for the authorised signatories to act on behalf of the company.

# Section 5 Lives assured

There may be up to six lives a indicated by ticking the appr	assured - including the <i>individual</i> applicant(s). If opriate box.	either applicant is a life assured this should be
The first applicant is the life a	assured. The second applicant is	the life assured.
Please indicate when the dea	ath benefit is to be paid by ticking the appropriat	te box
The death benefit is to be pa	id on the death of the first life assured.	
The death benefit is to be pa	id on the death of the last life assured.	
	Life Assured 1	Life Assured 2
Title:		
Surname:		
Forenames (in full):		
Relationship to applicant(s):		
Residential address (in full) (must be provided):		
Postcode:		
Country of residence:		
Nationality:		
Date of birth (dd/mm/yyyy):		
Sex:	Male Female	Male Female
	Life Assured 3	Life Assured 4
Title:		
Surname:		
Forenames (in full):		
Relationship to applicant(s):		
Residential address (in full)		
(must be provided):		
Postcode:		
Country of residence:		
Nationality:		
Date of birth (dd/mm/yyyy):		
Sex:	Male Female	Male Female
	Life Assured 5	Life Assured 6
Title:		
Surname:		
Forenames (in full):		
Relationship to applicant(s):		
Residential address (in full) (must be provided):		
Postcode:		
Country of residence:		
Nationality:		
Date of birth (dd/mm/yyyy):		
Sex:	Male Female	Male Female

### Section 6 PIMS Wealth Insurance

### Please complete this section ONLY if you are applying for PIMS Wealth Insurance.

Full details of PIMS Wealth Insurance are contained in the *Key Features* and the *Terms and Conditions* of the Personal Investment Management Service. The maximum age at the outset of PIMS Wealth Insurance is 85 years attained.

Please note that each of the lives assured applying for PIMS Wealth Insurance will be required to complete a health questionnaire. It is possible to protect up to two lives with PIMS Wealth Insurance. These may be any of the lives assured named in section 5. Please indicate below who are to be the lives protected by PIMS Wealth Insurance. The first investor is protected by PIMS Wealth Insurance The second investor is protected by PIMS Wealth Insurance PIMS life insured 1 PIMS life insured 2 Others Title: Surname: Forenames (in full): Residential address (in full) (must be provided): Postcode: Country of residence: Date of birth (dd/mm/yyyy):

### Important information

Male

Female

Sex:

If there are two lives protected by PIMS Wealth Insurance, where the PIMS contract is on a joint life, first death basis the PIMS Wealth Insurance benefit will be paid on the death of the first person covered by PIMS Wealth Insurance. If the PIMS contract is set up on a joint life, last survivor basis and there are two lives protected by PIMS Wealth Insurance, the benefit will be paid on the death of the second person covered by PIMS Wealth Insurance.

Male

Female

Please note the maximum investment value that can be protected by PIMS Wealth Insurance at outset is GBP 1,000,000 (USD 1,500,000/EUR 1,500,000). Amounts over and above these figures at outset will not be protected by PIMS Wealth Insurance.

# Section 7 Investment

Amount of investment (minimum investment is GBP 50,000, USD 80,000 or EUR 80,000). Please leave blank if you are using the share exchange scheme – see below:

Amount and currency				
Investment amount: G	BP/USD/EUR*			
	vith this form. The instruction		ittached bank instruction should be compl should be obtained from Royal London 36	
Reference for banker'	s draft/telegraphic transfer:			
Please contact Royal	London 360° for a reference n	umber.		
Source of funds:				
Enter the source of th	e funds to be invested such as should be disclosed here.	s legacy, property sale, inve	estments etc. For trust cases, the origin of	the
	y be split equally into a numben nber of policies is required ple		uch that there is a minimum of GBP 1,000 in	n each
Share exchange scher	ne			
If you are transferring	or selling units in a fund to inv	vest in PIMS, you will need	to complete the <i>Transfer Authority Form.</i>	
Please tick this box if	you will be using this facility			
Where you are using t	his facility, please tell us what	your investment is compos	sed of (tick as appropriate):	
Holdings to be transfe	erred Holdings to	be sold Cash		
Source of wealth ques	stions			
of Man Insurers are re		ealth information for every	at Insurance and Pensions Authority, all Isle applicant. Please note that where the sing te must be attached.	
Please provide details	of the applicants' earned/unea	arned income from all sourc	ces including any bonuses.	
	This year	Last year	Previous year	
Earned				
Unearned				
If you have stated ann	ual unearned income please p	rovide details.		
Where the source of f	unds for this application are fr	rom any of the following ple	ease provide details:	
Sale of investment				
Name of investment:				
Date of sale (dd/mm/yyyy):				
	(If necessary please continue	e on a separate sheet.)		

# Section 7 Investment continued

Savings	
How were savings accumulated?	
Please detail the bank/ building society where the savings were held:	
Sale of property	
Address of property:	
Date of sale (dd/mm/yyyy):	
Total amount:	
Maturing investments or police	cy claim
Date of sale (dd/mm/yyyy):	
from which company:	
Company sale Name of company:	
Principal activity of the company:	
Date of sale (dd/mm/yyyy):	
Total amount:	
Applicants' share of sale proceeds:	
Inheritance	
Date received (dd/mm/yyyy):	
From:	
Total amount:	
For all other sources such as a lottery win, gift, compensation payment etc	
please provide details:	
Are you a public official or	Yes No If <b>yes</b> , please give details
senior executive of a	
publicly owned corporation or are you associated	
with anyone holding such	

- 1. If the investor is a company, please submit details of annual company profits or complete the questionnaire in respect of the ultimate beneficial owner. If this is a trustee investment please complete the questionnaire in respect of the settlor.
- 2. Royal London 360° reserves the right to request further documentary evidence of source of wealth should it be considered necessary.

### Section 8 Choice of funds

#### Please note:

**Select PIMS investors have access to a selected range of funds only.** Please contact your financial adviser for details of funds available at specially negotiated discounts.

#### Flexible PIMS investors have access to the Select range of funds and any other acceptable assets.

Through Flexible PIMS you can invest in any collective investment scheme that can be priced and dealt in (subject to the asset being acceptable to the Company). If you are unsure about a proposed fund's acceptability, please contact the Royal London 360° Dealing team on +44 (0)1624 681 488 or by email via dealing@royallondon360.com.

Note: Select PIMS has a slightly lower charging structure than Flexible PIMS, reflecting the restricted choice of investment.

Please list your choice of funds in the appropriate sections below, remembering to include a minimum of 3% of your total investment allocation in the Cash Account. The minimum investment per fund is GBP 5,000 (or currency equivalent) subject to an overall minimum investment in PIMS of GBP 50,000 (or currency equivalent). Please make sure you mention the SEDOL/ISIN for each fund, otherwise we may not be able to place your investment correctly.

Total investment	GBP/USD/EUR*			
Cash Account	GBP/USD/EUR*	or	%	
	(a minimum of 3% of the initial PIMS value, reducing to 2% af	ter 5 years, n	nust be retained in	the PIMS Cash Account)

The remaining funds available should be allocated across the investment sections below, subject to the above restrictions.

### Select PIMS

Fund group	Fund name	Unit type	Onshore/ Offshore	SEDOL/ ISIN	Amount (GBP, USD or EUR) or %	

#### Flexible PIMS

Fund group	Fund name	Unit type	Onshore/ Offshore	SEDOL/ ISIN	Amount (GBP, USD or EUR) or %	

#### Unless specified we will purchase accumulation units.

Please ensure that the total	amount invested across	both sections a	and the PIMS Cash	n Accounts equals	your total
nvestment allocation.					

Total amount invested	GBP/USD/EUR*	or	%
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### Credit Policy pertaining to deposits or accounts

For reasons of credit control and risk mitigation Royal London 360° does not normally hold balances or deposits in accounts with institutions, or their subsidiaries, which have a credit rating lower than A1 (Standard & Poors) or P1 (Moodys). If it is decided that a policy is to place such an investment with an institution that does not meet this criteria then the policyholder(s) must sign a declaration specifically instructing the removal of the restriction before Royal London 360° can, or will, action the investment.

### Section 8 Choice of funds continued

### "Experienced", "Sophisticated" or "Professional" Funds

Due to regulatory restrictions (external to Royal London 360°), because of the extremely high risk associated with them and the relative lack of regulation or supervision, certain funds are only available to "experienced", "sophisticated" or "professional" investors who are able to completely understand the implications of investing in such assets and can stand the entire loss of the investment. In order to ensure that potential investors meet the necessary regulatory criteria and fully understand the nature and risks associated with such an investment Royal London 360° will require the Policyholder(s) to sign the funds application form making the appropriate declaration to confirm they qualify and meet the required standards for that fund. This declaration must be obtained prior to the purchase transaction being placed and Royal London 360° reserves the right, entirely at its own discretion, to decline to invest in a particular fund without providing any explanation for its rationale.

## Section 9 Appointment of investment adviser

Should you wish to appoint an investment adviser please complete the investment adviser form. If Royal London 360° does not receive this document then instructions will only be accepted from the applicant(s).

# Section 10 Regular withdrawals

This section should only be completed if regular withdrawais are required.				
Payments may be made to the applicant(s) only.				
I/We* wish to withdraw a fixed amount of <b>GBP/USD/EUR*</b> each year				
or % of the portfolio value each year, payable:				
Monthly Quarterly Half yearly Annually				
Please note that each transaction must equal a minimum of GBP 250 (or currency equivalent).				
First withdrawal:				
The first withdrawal must be between the 1st and 28th of the month.				
Day Month Year				
This is the date that the withdrawal is made and may not be when you receive the payment.				
Payment method:				
Payee name:				
Address:				
Postcode:				
Country:				
If the payment is to be sent direct to your bank please provide the following details.				
Name of bank:				
Address of bank:				
Postcode:				
Account number:				
Bank sort code:				

### Section 11 Declaration

- I/We\* apply for the Personal Investment Management Service on the standard terms and conditions as set out in the Policy Terms and Conditions.
- To the best of my/our\* knowledge and belief all of the statements I/we\* have given are true and complete and, together with the Policy *Terms and Conditions* and Policy schedule, will form the basis of the contract between me/us\* and Royal London 360 Insurance Company Limited ("the Company").
- I/We\* have read and understood the product literature and the Key Features of the Personal Investment Management Service.
- I/We\* understand where I/We\* have applied for PIMS Wealth Insurance on the Company's standard terms that an additional cost will be levied to pay for this cover and this will be debited from the PIMS Cash Account.
- I/We\* understand the charges that will be levied and that a trail commission of from my/our\* portfolio and paid quarterly to my/our\* servicing agent.
- I/We\* confirm that I am/we are\* aware of the fees payable for the chosen investment(s) to be held in my/our\* PIMS portfolio. I/We\* understand that the fees exist partly to meet promotion and distribution expenses of the product, including commission paid to a financial adviser and/or\* fund adviser.
- I/We\* understand and accept that the Company is in no way responsible for my/our\* choice of investments within my/our\* PIMS portfolio.
- I am/We are\* not resident(s) of the USA and I/we\* understand that the Company reserves the right to impose special terms or terminate my/our\* policy if I/we become a resident or citizen of the USA.
- I/We\* have not been, or I am/we are\* not in the process of being dissolved, struck off, wound up or terminated. (Applicable to Corporate/Corporate trustee\* applicants only.)
- I/We\* declare that to the best of my/our\* knowledge and belief I am/we are\* not subject to any legislation that would make this application unlawful.

Please remember that failure to disclose any material facts (even if they are outside the scope of the questions asked) may result in the contract being ineffective even if we, the insurer, accept the application. Material facts are those that we, as an insurer, would regard as likely to influence the assessment of your application. If you are in any doubt as to whether a fact is material, you should disclose it.

Signed:			
Print name in full:			
Date (dd/mm/yyyy):			
Email address(es):		] [	
Signed:			
Print name in full:			
Date (dd/mm/yyyy):			
Email address(es):		] [	
Please enter the country where this form was completed:			
	nail address you consent to being contacted by If you do not wish to be contacted via email fo		

### Section 11 Declaration continued

### **Data Protection Act**

By signing this form in the space indicated, you consent to us using the information you provide for the following purposes:

- · administration of your policy
- crime prevention and prosecution of offenders
- · market research and statistical purposes.

The information you have provided may be shared with other companies both inside and outside of the Royal London Group, financial advisers 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 Act 2002 entitles you, on payment of a £10 fee, to obtain a copy of the information we hold on you.

#### **Further information**

For further information please write to:

Data Protection Officer, Royal London 360°, PO Box 154, Isle of Man IM99 1WS.

### Section 12 Financial adviser details

This section must be completed by your financial adviser.

Adviser's name:

Company:

Adviser number:

Name of regulator (if applicable):

Regulatory number:

Address (in full):

Postcode:

Country:

Telephone:

Fax:

Email:

Adviser's signature:

Date (dd/mm/yyyy):

#### **New Business**

PO Box 154, Douglas, Isle of Man, IM99 1WS, British Isles Tel: +44 (0) 1624 681 578 Fax: +44 (0) 1624 690 578 Email: newbusiness@royallondon360.com

### Servicing

PO Box 154, Douglas, Isle of Man, IM99 1WS, British Isles Tel: +44 (0)1624 681 681 Fax +44 (0)1624 611 088 Email: servicing@royallondon360.com

### **IFA Support**

PO Box 154, Douglas, Isle of Man, IM99 1WS, British Isles Tel: +44 (0) 1624 681 531 Fax: +44 (0) 1624 690 529 Email: salessupport@royallondon360.com

#### Internet

www.royallondon360.com

Issued by Royal London 360 Insurance Company Limited, a member of the Royal London 360 group of companies. Registered Office: Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles. Telephone: +44 (O)1624 681681. Telephone calls may be recorded. Fax: +44 (O)1624 611088 or Website: www.royallondon360.com. Royal London 360 Insurance Company Limited is authorised by the Isle of Man Government Insurance and Pensions Authority. Registered in the Isle of Man Number 076981C. A member of the Association of International Life Offices.



# Personal Investment Management Service

# Bank Instruction Letter

Please select one of	the options below.
This is a copy ir	nstruction - the original has been sent to the bank detailed below.
Please forward	this instruction to the bank detailed below.
The manager:	Bank/Building Society
Address:	Barry Buriaing Society
, id.d. 200.	
Postcode:	
Reference number:	
	per must be obtained in advance from Royal London 360° and quoted by the bank on all advices. Failure in payment being rejected by our bankers.
Droparo a draft	payable to 'Royal London 360 Insurance Company Limited' quoting the reference number above for exactly:
GBP/USD/EUR	· 
in figures	
and in words	
and post it imm	nediately to Royal London 360°, PO Box 154, Douglas, Isle of Man IM99 1WS, British Isles.
Remit by telegr	raphic transfer exactly:
GBP/USD/EUR	*
in figures	
and in words	
0520 86), PIMS USD	val London 360 Insurance Company - PIMS GBP Account 60052086* (IBAN: GB35 BARC 2026 7660 Account 43381177* (IBAN: GB46 BARC 2026 7643 3811 77) or PIMS EUR Account 67064566* (IBAN: 667 0645 66) at Barclays Bank, PO Box 9, Douglas, Isle of Man IM99 1AJ, British Isles (sort code 20-26-76) te number above.
Please charge the ar	mount of the payment plus any charges or expenses incurred in the transfer to my/our* account.
Account name:	
Account number:	
Sort code:	
Address:	
Postcode:	
Signature(s):	
Date (dd/mm/yyyy)	

#### **New Business**

PO Box 154, Douglas, Isle of Man, IM99 1WS, British Isles Tel: +44 (0) 1624 681 578 Fax: +44 (0) 1624 690 578 Email: newbusiness@royallondon360.com

### Servicing

PO Box 154, Douglas, Isle of Man, IM99 1WS, British Isles Tel: +44 (0)1624 681 681 Fax +44 (0)1624 611 088 Email: servicing@royallondon360.com

### **IFA Support**

PO Box 154, Douglas, Isle of Man, IM99 1WS, British Isles Tel: +44 (0) 1624 681 531 Fax: +44 (0) 1624 690 529 Email: salessupport@royallondon360.com

#### Internet

www.royallondon360.com

Issued by Royal London 360 Insurance Company Limited, a member of the Royal London 360 group of companies. Registered Office: Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles. Telephone: +44 (O)1624 681681. Telephone calls may be recorded. Fax: +44 (O)1624 611088 or Website: www.royallondon360.com. Royal London 360 Insurance Company Limited is authorised by the Isle of Man Government Insurance and Pensions Authority. Registered in the Isle of Man Number 076981C. A member of the Association of International Life Offices.

