PHOENIX WEALTH

INVESTMENT BOND

PORTFOLIO REBALANCING

Phoenix Wealth, Unit Linked Life & Pensions, PO Box 1393, Peterborough, PE2 2TP.

What is this form for?

To change or begin a portfolio rebalancing strategy to all policies on an existing Investment Bond.

If you are currently taking withdrawals from particular funds, portfolio rebalancing may have an impact on the withdrawals. You may wish to discuss this with your financial adviser.

If you have any questions please contact us on **0345 129 9993**.

Definitions

Bond and **Policy** – The Investment Bond can be split into a number of policies, which are treated as separate policies within their own right. When we use the word 'Bond' we are referring to the policies collectively and when we use the term 'Policy' we are referring to each individual policy that makes up your Bond.

1. BOND NUMBER

☐☐☐☐☐☐☐

2. PORTFOLIO REBALANCING

You cannot apply portfolio rebalancing and drip-feeding on the same Policies at the same time. If you apply Portfolio Rebalancing any Drip-feeding currently in place will be stopped.

Do you wish to apply Drip feeding equally across all Policies?

☐ Yes – **Please complete Q2.1** ☐ No – **Please complete Q2.2**

2.1 Simplified strategy

Please select **one** of the following options. If you have switched funds you can only select Option 2.

☐ **Option 1**: Original investment allocation. **Go to Q3**.

☐ **Option 2**: New investment allocation (complete the table below)

List your selected funds and the percentage you wish to be invested per fund – please refer to the **Investment Bond Fund List**.

Fund name	**% of total investment** (whole % only)
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
TOTAL	**100%**

2.2 Differentiated strategy

Please select **one** of the following options. If you have switched funds you can only select Option 2.

All policy ranges or numbers must match those already set up in your Bond.

☐ **Option 1**: Original investment allocation.

Which policies do you want to apply portfolio rebalancing to?

☐ **Option 2**: New investment allocation (complete the table below).

List your selected funds and the percentage you wish to be invested per fund – please refer to the **Investment Bond Fund List**.

Policy numbers/policy ranges	**Fund name**	**% of total investment (whole % only)***
		%
		%
		%
		%
		%
		%
		%
		%
	TOTAL	**%**

3. START DATE AND FREQUENCY

Please select the frequency and start date for the regular portfolio rebalancing.

Start date: ☐☐/☐☐/☐☐☐☐ (must be between the 1st and 28th)

Frequency: ☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Annually

4. SIGNATURES

This form must be signed by all owners/trustees or a financial adviser that has been given authority by all owners/ trustees. If you need more space, please use a photocopy of this page and attach to this form.

Financial Crime (verifying your identity to prevent Fraud & Money Laundering)

To verify your identity and prevent financial crime we may use and share your information with any company within the Phoenix Group, with companies who work for us and with appropriate organisations.

We may also search, send your details to, and use information from third party verification service providers and financial crime and credit reference agencies (Third Parties). This involves checking your details against databases these Third Parties use. Phoenix Group and these Third Parties may keep a record of the search, the results of the search, any suspicions of financial crime and the details may be used to assist other companies for verification and identification purposes. This search is not a credit check and your credit rating should be unaffected.

By signing this form you are giving your consent to these activities which will make it easier for you to do business with us and help prevent financial crime. For more information, please write to the Money Laundering Reporting Officer, 10 Brindleyplace, Birmingham, B1 2JB.

I/We confirm and accept that this form constitutes a change of terms to the original application completed at the time of taking out the Bond but nonetheless is incorporated into and forms part of the contractual arrangement between me/us and Phoenix Wealth.

Financial adviser (if signing on behalf of Client(s)):*

Signature:

✖

Date:

☐☐ / ☐☐ / ☐☐☐☐

*Only financial advisers that have a servicing agency agreement with us are able to sign and submit instructions on behalf of clients.

Owner/trustee

Name 1	Signature ✖	Date ☐☐/☐☐/☐☐☐☐
Name 2	Signature ✖	Date ☐☐/☐☐/☐☐☐☐
Name 3	Signature ✖	Date ☐☐/☐☐/☐☐☐☐
Name 4	Signature ✖	Date ☐☐/☐☐/☐☐☐☐

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