PHOENIX WEALTH

INVESTMENT BOND

REGULAR WITHDRAWAL FORM (DIFFERENTIATED STRATEGY)

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

What is this form for?

This form is for owners or Trustees of an existing Bond to set up regular withdrawals from specific policies and funds. It can be used to:

- start a new regular withdrawal strategy
- change an existing regular withdrawal strategy.

Remember:

You may incur a tax liability if you withdraw more than 5% a year, including any adviser charges, of the total amount invested in the Bond. This will be payable:

- immediately – if you fully surrender one or more policies
- at the end of the policy year – if you partially surrender one or more policies.

If this form is being completed by an attorney on behalf of an owner, we need to see the original power of attorney.

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. WITHDRAWAL INSTRUCTIONS

Please confirm if you are:

☐ Starting a new regular withdrawal strategy ☐ Changing an existing regular withdrawal strategy

3. WITHDRAWAL DETAILS

You must complete this section if you are starting a new regular withdrawal strategy. You can also use this section to change the frequency of your existing withdrawals.

Please enter a start date below. If you do not confirm a start date, and we have received all requirements, we will set up the withdrawal strategy the day after we receive this application. Payment will be made to your bank account approximately four working days after this date.

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

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

4. POLICY WITHDRAWAL STRATEGY

You must complete this section if you are setting up a new regular withdrawal strategy to determine the withdrawal amount and the policies you wish to take it from. You can also use this section to alter your existing policy withdrawal strategy.

Select **one** of the following to confirm how you want us to calculate **each withdrawal** amount:

☐ **Option 1:** [%] of all contributions to be paid proportionately based on the frequency chosen.

☐ **Option 2:** [%] of the fund value at the date of the withdrawal to be paid proportionately based on the frequency chosen.

☐ **Option 3:** fixed amount from each policy (policy range).

☐ **Option 4:** total fixed amount of [£]

This amount will be withdrawn from your policies sequentially, in the priority order you indicate in the table

Complete the table to confirm the policies you want to use and the proportion/amount of the withdrawal you want to take from each. The policy ranges or policy numbers specified in the table must match those already set up in your Bond. If you are changing an existing withdrawal strategy, you only need to enter the numbers of the policies you wish to change.

Policy range (e.g. 1, 1–6)	**Option 1** (whole % only)	**Option 2** (whole % only)	**Option 3**	**Option 4 priority for withdrawal** (e.g. 1, 2, 3)
	%	%	£	
	%	%	£	
	%	%	£	
	%	%	£	
	%	%	£	
	%	%	£	
	%	%	£	
	%	%	£	

*Priority 1 policy funds will be fully withdrawn before priority 2 policy funds, etc. You can use the same priority for different policies – these will be treated in the same way and fully withdrawn before moving on to the next priority level.

5. FUND WITHDRAWAL STRATEGY

Please contact us if you wish to set up a Fund withdrawal strategy based on your Funds held.

6. BANK/BUILDING SOCIETY DETAILS

Complete this section if you haven't previously given us your bank details or they have changed.

Payment must be made directly to the bank account of the bond owner(s) or trustee(s).

Name	
Address (including postcode)	
Account/roll number	
Sort code	– –
Name of account holder	

7. SIGNATURES

This form must be signed by all owners/trustees or a financial adviser that has been given written authority, that we have received, by all owners/trustees. If you need more space, please use a photocopy of page 5 and attach to this form.

You acknowledge that Phoenix Life Limited may need to seek additional information regarding your identity or the identity of any individuals associated with you where the owner of the Investment Bond is not an individual. Phoenix Life Limited may be required to disclose such information to the tax authority(ies) of the individual's country(ies) of tax residence or HMRC and otherwise cooperate with formal requests from such tax authority(ies).

You acknowledge that Phoenix Life Limited will not be liable for any loss attributable to any incorrect information provided to us or the non-provision of information.Client declaration.

Data protection

Phoenix Life Limited, a member of the Phoenix Group, will hold and use the personal information you provide to set up and operate your Plan and for business analysis.

Your information may be sent for the above reasons to companies within the Phoenix Group in the UK and also to other companies acting on our instructions, including those outside of the European Economic Area.

By signing this form you consent to the use of this personal data for the reasons set out above. You also agree to Phoenix Life Limited passing this information onto: (1) your professional adviser(s) as you notify to us from time to time; and (2) such other third parties as may be necessary in connection with the provision and operation of your Plan, including our professional advisers.

We would like to use your contact details and share them with companies within the Phoenix Group (or other carefully selected companies) to enable us and them to send you information about other products and services. You may be contacted by post, telephone or email.

If you do not wish us to do this please tick this box ☐

Otherwise we will assume that you are happy to receive this information and to be contacted in this way for the time being. Personal information regarding beneficiaries will not be used for marketing purposes. You may change your mind at any time by writing to the Data Protection Officer, 1 Wythall Green Way, Wythall, Birmingham, B47 6WG.

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 UK 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, 1 Wythall Green Way, Wythall, Birmingham, B47 6WG.

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: __ __ / __ __ / __ __ __ __

Owner/trustee

Name		
Address		
Country of residence		
Nationality		
Signature	✖	✖
Date		
	☐ Please tick this box if you wish us to send you information about other products and services.	☐ Please tick this box if you wish us to send you information about other products and services.

Name		
Address		
Country of residence		
Nationality		
Signature	✖	✖
Date		
	☐ Please tick this box if you wish us to send you information about other products and services.	☐ Please tick this box if you wish us to send you information about other products and services.

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