

# WITHDRAWAL REQUEST

## **WHO IS THIS FORM FOR?**

This form is for policyholders who wish to take a one-off withdrawal from their policy, set-up a regular withdrawal or amend an existing regular withdrawal.

If you wish to surrender your policy in full, or surrender segments, please use our Surrender Request form, which is available by contacting us.

Withdrawals are not permitted where you have submitted a request to surrender your policy in full. If you would like to discuss your options please contact RL360 on: +44 (0)1624 681682.

## **COMPLETING THIS FORM**

In order to help us process your request as quickly as possible, please ensure this form is completed in full, and all documents listed in the checklist are provided. We need you to provide this important information to help us fulfil our regulatory obligations to ensure our records are up to date and in handling your request. Please note failure to provide this information will result in your request being delayed.

By completing this form you will be requesting a withdrawal from your policy. We recommend that you speak to your financial adviser before doing this, so that they can make you aware of any tax charges that may apply. Depending on your policy early withdrawal penalties may apply, please consult your policy literature before requesting a withdrawal.

If you need help completing this form please contact our Customer Services Team on +44 (0)1624 681682 or alternatively you can email [csc@rl360.com](mailto:csc@rl360.com).

We can only accept a scanned or faxed copy of this instruction if it has been signed by all individual owners, trustees or authorised signatories. Please note we do not require the original copy, however we do reserve the right to ask for the original form if we deem this appropriate. We will require advance notice before we are able to start or amend regular withdrawals.

Please complete in BLOCK capitals throughout.

**Please make sure you read the important notes section of this form.**

## **WHEN YOU HAVE COMPLETED THIS FORM**

Please send the completed form to [servicing@rl360.com](mailto:servicing@rl360.com) or alternatively you can post this to:

Policy Servicing Team  
International House  
Cooil Road  
Douglas  
Isle of Man  
IM2 2SP  
British Isles

**A confirmation letter will be sent to you once we have set up or amended your regular withdrawals. For one-off withdrawals, a confirmation letter will be sent to your registered email as a pdf attachment once the payment has been released.**

**CHECKLIST**

This is the key information we need to fulfil your request. Please tick each box to confirm you have supplied this information when completing the form:

- I have selected the desired currency in which I want to be paid
- Where my country of residence and country of beneficiary bank does not match I have given a clear explanation
- I have provided my tax information
- I have provided certified verification of address and proof of identity
- All policyholders have read and signed the declaration
- Where payment is being made to a new bank account I have provided a copy of the bank statement

We take the security of your policy very seriously; therefore, from time to time we may contact you by telephone to verify your identity. Without completing this short call, we may not be able to action your request.

- I understand that a member of RL360 may contact me to verify my identity
- I have checked my cash account and I have sufficient cash available for the withdrawal
- I have ensured the form is not in an editable format when submitting and I have not pasted on the signature
- I have either hand signed the form or completed it using an acceptable digital format which includes the audit report

We can accept the following digital signatures:

- DocuSign
- AdobeSign
- Pandadoc
- Sign Now
- Zoho Sign

Please ensure the relevant audit report is included when sending the payment through

**ANY OTHER INFORMATION RELEVANT TO MY REQUEST**

**POLICYHOLDER DETAILS**

**Policyholder details**

RL360 policy number

**Policyholder 1**

**Policyholder 2 (if applicable)**

First name(s)

Last name(s)

Current residential address and postcode (in full)

Correspondence address and postcode (if different from residential address)

Daytime telephone

Email address

**Trust details (if applicable)**

Trust name

Correspondence address and postcode

Daytime telephone

Email address

Please complete an automatic exchange of information entity self certification form located here - [www.rl360.com/row/aeoi/index.htm](http://www.rl360.com/row/aeoi/index.htm)

**Company details (if applicable)**

Company name

Correspondence address and postcode

Please complete an automatic exchange of information entity self certification form located here - [www.rl360.com/row/aeoi/index.htm](http://www.rl360.com/row/aeoi/index.htm)

Daytime telephone

Email address

**WITHDRAWALS**

I hereby request and authorise RL360 Insurance Company Limited to pay a withdrawal(s) from my policy in accordance with the details as set out below.

How do you want to take your withdrawals? (choose one only)

**As a fixed amount of:**

OR

**Total % per annum to be paid (For regular withdrawals only)**

%

Currency of the withdrawal

Withdrawal frequency  One-off **OR** for regular withdrawals:  Monthly  Quarterly  Half-yearly  Yearly

If the requested withdrawal amount is not available then please proceed with withdrawing the maximum amount available

**For regular withdrawals**

Date of first withdrawal       (dd/mm/yyyy)

Please note this will be the date we begin processing your withdrawal request. Funds can take up to 10 working days from the above date depending on the payment method chosen.

Date of final withdrawal       (dd/mm/yyyy)

Would you like to cancel all existing regular withdrawals held?  Yes  No

**Payment instructions**

Payment method

TT                      **OR**                       BACS  
(£20 Bank charge)

TT (Telegraphic Transfer) can be used for payments of any currency. BACS (Bankers Automated Clearing Services) can only be used for making GBP payments to a bank account in the UK/Channel Islands/Isle of Man. There is usually no charge for BACS and cleared funds should appear in your bank account within 3-5 working days.

**For payments by TT or BACS**

If you are asking us to pay a withdrawal into a bank account that we have not previously made payments to or received payments from, please provide us with a copy of your latest bank statement for this account to include transactions.

Bank name

Bank address and postcode

Account holder's name

Bank Swift Code (International)  OR Bank Sort Code (UK only) --  
Swift Code must be either 8 or 11 digits

Account number or IBAN

Routing bank name (if applicable)

Routing bank account number (if applicable)

Routing bank SWIFT code (if applicable)

Reference (optional)

**Country connection**

Please confirm your connection to the country where your bank account is held if this differs to your residency

**Reason for withdrawal/surrender**

We are dedicated to improving our customer experience and as such, please tell us your reason(s) for your withdrawal.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> House purchase                | <input type="checkbox"/> Poor investment returns   | <input type="checkbox"/> Unable to pay further premiums   |
| <input type="checkbox"/> School fees                   | <input type="checkbox"/> High product charges      | <input type="checkbox"/> Moving to another provider       |
| <input type="checkbox"/> Medical emergency             | <input type="checkbox"/> Poor customer service     | <input type="checkbox"/> Payment term completed (Matured) |
| <input type="checkbox"/> End of charging period        | <input type="checkbox"/> Urgent money requirements | <input type="checkbox"/> Mis-sold product                 |
| <input type="checkbox"/> Change of investment strategy | <input type="checkbox"/> Tax reasons               | <input type="checkbox"/> Financial concerns               |

Other

**SIGNATURES**

**Policyholder/Trustee/Authorised Signatory 1**

Signature

Date signed (dd/mm/yyyy)

Full name

Country or countries of tax residence

Tax Identification Number (TIN)

If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, Resident Card Number).

Are you a Specified US Person?  Yes  No

**Policyholder/Trustee/Authorised Signatory 2**

Signature

Date signed (dd/mm/yyyy)

Full name

Country or countries of tax residence

Tax Identification Number (TIN)

If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, Resident Card Number).

Are you a Specified US Person?  Yes  No

**Policyholder/Trustee/Authorised Signatory 3**

Signature

Date (dd/mm/yyyy)

Full name

Country or countries of tax residence

Tax reference number (ie TIN/NI)

If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, Resident Card Number).

Are you a US Specified Person?  Yes  No

**Policyholder/Trustee/Authorised Signatory 4**

Signature

Date (dd/mm/yyyy)

Full name

Country or countries of tax residence

Tax reference number (ie TIN/NI)

If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, Resident Card Number).

Are you a US Specified Person?  Yes  No

**IMPORTANT NOTES**

**Withdrawals**

Any withdrawals taken from your policy will be subject to the minimum withdrawal amounts as detailed in your policy literature. The withdrawal amount may need to be reduced if it will take your policy below the minimum allowable policy value.

**Tax**

UK residents may be subject to a tax charge if withdrawals are in excess of the 5% cumulative withdrawals available (of initial and any additional investments) in any given policy year. The tax treatment of withdrawals paid from your policy will depend upon your personal circumstances at that time. We recommend that you speak to your financial adviser or tax professional about your tax situation before taking action on your policy.

**General**

Depending on the investment(s) to which the value of your policy is linked, some investment managers may have terms and conditions that prevent us from realising a cash value in a timely fashion, and this could delay your withdrawal payment.

Where applicable, please ensure that the authorised signatory list(s) that we hold for this policy are up-to-date before submitting withdrawal instructions. Where authorised signatories have changed and we are unable to match those on this form with our records, this will delay the withdrawal. We may also require further information for the purposes of Anti-Money Laundering.

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

**Privacy policy**

Our full privacy policy can be viewed at [www.rl360.com/privacy](http://www.rl360.com/privacy) or can be obtained by requesting a copy from our Data Protection Officer.