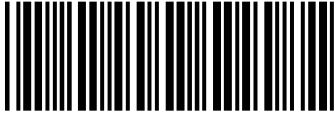


PLEASE COMPLETE FOR EACH PROPOSED SETTLOR AND PERSON-IN-INTEREST*



1. _____
Distributor Name
2. _____
Advisor Name
3. _____
Applicant Name

*If the proposed Settlor is a corporation, please complete this form for the entity and for each shareholder who owns 5% or more of the shares of the company. If the proposed Settlor is a trust, complete this form for the entity and each settlor, trustee, beneficiary and any custodian, protector or other person entitled to give instructions to the trustee.

REQUIRED DOCUMENTATION:

INDIVIDUALS	CORPORATIONS	TRUSTS
<ul style="list-style-type: none"> ■ Unexpired government issued ID bearing photo and signature (e.g. passport); ■ Verification of address (e.g. utility bill, voter registration card). 	<ul style="list-style-type: none"> ■ Certified Certificate of Incorporation; ■ Certified Certificate of Compliance or Letter of Good Standing from regulatory agency in country of incorporation; ■ Certified list and signatures of directors; ■ List of registered shareholders; ■ For all shareholders who own 5% or more of the company: <ul style="list-style-type: none"> - Unexpired government issued ID bearing photo and signature (e.g. passport); - Verification of address (e.g. utility bill, voter registration card). 	<p>For all settlors, trustees, beneficiaries and any custodian, protector or other person entitled to give instructions to the trustees of the trust:</p> <ul style="list-style-type: none"> ■ Unexpired government issued ID bearing photo and signature (e.g. passport); ■ Verification of address (e.g. utility bill, voter registration card). <p>For all directors or authorized signatories of corporate trustees:</p> <ul style="list-style-type: none"> ■ Unexpired government issued ID bearing photo and signature (e.g. passport); ■ Verification of address (e.g. utility bill, voter registration card).

4. Complete the following:
 Name: _____ Tel #: _____ Work #: _____
 Permanent Address: _____
 Date of Birth: _____ Place of Birth: _____
 Country of Citizenship: _____ Country of Residence: _____
 Net Worth \$: _____ Occupation: _____
 Employer Name: _____ Employer Address: _____
 If self employed, name and type of business: _____
 Provide a description of applicant's source of wealth: _____
 What is the source of funds being used to purchase this investment plan (be specific): _____

5. When did the Settlor/Person-in-Interest first become a customer of the Distributor? _____
6. How long have you known the Settlor/Person-in-Interest? _____
7. Is the person to whom this form applies, a Public Official, connected to or associated with a Public Official (includes immediate family, aides, advisors, business associates, business/companies)? Yes No
8. If a corporate Settlor, I certify the corporation is NOT a company that issues "bearer shares". Yes No

If you have not satisfactorily completed Sections 4 through 8, the application will not be processed until you have satisfied the Trust on these matters. The Trust reserves the right to request additional information as it deems necessary.

I HEREBY CERTIFY THAT COPIES OF THE REQUIRED DOCUMENTATION, ATTACHED HERETO, ARE TRUE AND CORRECT COPIES OF THE ORIGINALS.

 ADVISOR SIGNATURE

 DATE