

## Individual Self-Certification Form

COMPLETION OF THIS FORM IS MANDATORY. Tax regulations' require us to collect information about each beneficial owne 's tax residency. In certain circumstances (including if we do not receive a valid self-certifica ion from you) we may be obliged to share the information on your policy with the appropriate government authorities. If you have any questions about your tax residency, please contact your tax advisor. Should any information provided change in the future, please ensure you advise us of such changes within 30 days.

1. Policy / plan inf	ormation (if know	rn)							
Policy or plan name:						Policy #:			
Policyowner:					Member ID:				
2. Applicant / clair	mant informat	ion							
Name (first/middle/last):		DOB (dd-mmm-yyyy):							
Place of birth (country):			Nationality (list all):						
Residential address:			,						
City: Postal code:			Country:						
Mailing address (if applica	ble):	'							
Phone: H	W	С		Email:					
Do you have a Taxpayer I	dentification Numbe	er (TIN) for the residentia	al address above?				Yes	No	
If "yes", please provide TI	N:								
If "no", please select the r									
Country does not issu				.1					
		a TIN or equivalent numl				II. TINI	1		
No TIN is required. In	is only applies if the	e authorities of the count	ry of tax residence	indicated do n	ot require	e the TIN to	be disclose	∌d.	
Do you have tax reporting of registered business ac		jurisdiction(s) other than	your stated countr	y of residence,	or stated	d country	Yes	☐ No	
If "yes", please list jurisdi	ction(s)/country(ies	) below along with the Ta	axpayer Identification	on Number (TII	N):				
Jurisdiction/Country:					TIN	:			
Jurisdiction/Country:					TIN	:			
Jurisdiction/Country:					TIN	:			

## Declaration and signature of policyowner / applicant

To enable BF&M to confirm and document my tax status accurately (including, but not limited to, my tax status as a U.S. Person or Non-US Person for US federal income tax purposes), I hereby certify that:

- The information provided in this Declaration is complete and accurate.
- I am the beneficial owner of the account, or I am authorised to sign on behalf of the individual who is the beneficial owner of the account.
- I will notify BF&M immediately of any change in the personal information provided in this Declaration or in my circumstances relevant to this Declaration, and will provide BF&M with an updated Declaration within 30 days of such a change occurring. I further understand and agree that any failure to do so shall entitle BF&M, in its sole discretion, to terminate any policy in which I have a beneficial interest.

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<sup>&</sup>lt;sup>1</sup>The term "tax regulations" refers to the regulations created to enable automatic exchange of information and includes FATCA and CRS reporting, various agreements to improve international tax compliance entered into between the UK and its Crown Dependencies and its Overseas Territories and OECD Common Reporting Standard for automatic exchange of financial information.

Date (dd-mmm-yyyy):



Sign:

Declaration and signature of policyowner / applicant (cont'd)
I will comply with all tax and exchange control laws, regulations and reporting requirements imposed by any applicable jurisdiction relating to my accounts maintained with BF&M.
I am currently a US person². This assertion must be supported by a completed IRS form W-9 (accessible at www.irs.gov/formspubs).
I am not currently a US person², and I will notify BF&M should I become one. Please note that you may be required, under certain circumstances, to provide additional information/documentation confirming your tax status.
I authorise BF&M, at its sole discretion, to provide a copy of this form and any information regarding any account with BF&M to which I am a party to any tax authority or party that is authorised to act on behalf of such an authority.
Data protection declaration
By signing this form, I confirm/understand that:
I consent to BF&M processing my personal data, in accordance with BF&M's Privacy Policy ( <u>www.bfm.bm/privacy</u> ).
I understand that I may withdraw my consent at any time by email to <a href="mailto:privacy@bfm.bm">privacy@bfm.bm</a> but that may impact BF&M's ability to provide insurance or related services or pay insurance claims benefits.
If I have provided personal information relating to any third party, I confirm that I have received their consent for BF&M to process their personal information in line with the privacy notice.
submit this application and fully understand that by checking the "ACCEPT TERMS" box below, I confirm my agreement with the declaration set out above and on the previous page.
ACCEPT TERMS
Name:

<sup>&</sup>lt;sup>2</sup>A US Person is defined in Section 7701 (a) (30) of the Internal Revenue Code as a citizen or resident of the United States. A citizen generally means a person born or naturalised in the United States. A resident of the United States generally means (i) a lawful permanent resident, which includes the holder of a Green Card; (ii) an individual who meets a test indicating "Substantial Physical Presence" for the calendar year in the United States; or (iii) an individual who makes a valid election to be treated as a resident of the United States. If you are unsure whether you are a US Person, you should consult your tax adviser.