

(Please print in landscape form)



Foreign Tax Residency Supplementary Form

Product: _____

Proposal Number (if known): _____

Are any of the plan owners, trustees or beneficiaries resident for tax purposes anywhere other than the Republic of Ireland or the U.S.?

Yes No

If yes, then please complete the following sections (where applicable):

Please list the person's details and the country or countries in which they are resident for tax purposes, together with any tax identification numbers ('TIN') if relevant.

	(1) Individual or Entity	(2) Individual or Entity	(3) Individual or Entity	(4) Individual or Entity	(5) Individual or Entity
Name					
Plan Relationship					
Date of Birth					
Country of Birth					
Address					
Country of Tax Residency					
Country of Incorporation					
Tax Identification Number					

Controlling Person Details

Please list the person's details and the country or countries in which they are resident for tax purposes, together with any tax identification numbers ('TIN') if relevant.

	(1) Controlling Person	(2) Controlling Person	(3) Controlling Person	(4) Controlling Person
Name				
Date of Birth				
Country of Birth				
Address				
Country of Tax Residency				
Tax Identification Number				

Declaration

I certify that I have provided details of all of the countries in which I or other persons identified are resident for tax purposes along with the relevant Tax Identification Numbers. I acknowledge that the information contained in this form and other information that I may be required to submit to Irish Life may be provided to Revenue and that Revenue may exchange this information with the Tax Authorities in other countries in which I or other persons identified may be tax resident in.

I undertake to advise Irish Life of any change in circumstances that affect my tax residency or that of the other persons identified or causes the information herein to become incorrect and to provide Irish Life with a suitably updated self-certification and Declaration of such change of circumstances.

Signature

Date

Proposer 1

Proposer 2

Please note that we reserve the right to request additional information or documentary evidence to support your declaration.

Any acceptance and investment of your premium may be delayed should we have reason to doubt any of the information provided above.

Should any information provided change in the future, please ensure you advise us of the changes promptly.

If you require further information on the Common Reporting Standard please refer to the AEOI (Automatic Exchange of Information) webpage on Revenue.ie