

Amendments to Contingent Investment Adviser, Beneficiaries or Letter of Wishes

I/We would like to submit the following form to Metis Global (Singapore) Pte. Limited ("Metis SG"), for the purposes of effecting the following amendments to Plan Number.

Plan Number

--	--	--	--	--	--	--	--	--	--

A Appointment / Replacement of Contingent Investment Adviser

- with immediate effect
- with effect from the following date / /
- on the happening of the following event (e.g. upon my/our death)

Personal Particulars of Contingent Investment Adviser

Full Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>		Date of Birth
NRIC/FIN/Passport No.	Nationality	
Country of Residency		

Contact Information of Contingent Investment Adviser

It is important to inform us and to update the contact information should there be any changes.

Mobile Number		Email Address	
Residential Address	<input style="width: 100%;" type="text"/>		
Postal Code	Country	State/Region	

B Replacement of 2nd Tier Beneficiaries (Please complete Section C)

I/We would like to request that Metis SG appoint the following persons as my/our second-tier beneficiaries under my/our Trust Plan in place of my/our existing second-tier beneficiaries.

I/We understand that the power to appoint and remove second-tier beneficiaries under my/our Trust Plan is a power that is vested in Metis SG and Metis SG is under no obligation to accept and approve my/our request.

Trust Company Natural Person(s)

It is important to inform us and to update the contact information should there be any changes. This is to facilitate efficient distribution of the trust assets.

Trust Company Particulars

Name of Trust Company	UEN
Contact Number	Email Address

Natural Person(s)

Beneficiary 1 – Personal Particulars

Relationship to Settlor(s)			
Full Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>		Gender	
NRIC/FIN/Passport No.	Date of Birth		
Nationality	Country of Birth		
Mobile Number	Home	Work	Email Address
Residential Address	<input style="width: 100%;" type="text"/>		
Postal Code	Country	State/Region	



Plan Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Natural Person(s)

Beneficiary 2 – Personal Particulars

Relationship to Settlor(s)																					
Full Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>														Gender							
NRIC/FIN/Passport No.														Date of Birth		/	/				
Nationality														Country of Birth							
Mobile Number		Home			Work			Email Address													
Residential Address																					
Postal Code		Country			State/Region																

Beneficiary 3 – Personal Particulars

Relationship to Settlor(s)																					
Full Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>														Gender							
NRIC/FIN/Passport No.														Date of Birth		/	/				
Nationality														Country of Birth							
Mobile Number		Home			Work			Email Address													
Residential Address																					
Postal Code		Country			State/Region																

Beneficiary 4 – Personal Particulars

Relationship to Settlor(s)																					
Full Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>														Gender							
NRIC/FIN/Passport No.														Date of Birth		/	/				
Nationality														Country of Birth							
Mobile Number		Home			Work			Email Address													
Residential Address																					
Postal Code		Country			State/Region																

Plan Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Beneficiary 5 – Personal Particulars

Relationship to Settlor(s)																				
Full Name <small>(As in NRIC/FIN/Passport including any alias and other names)</small>												Gender								
NRIC/FIN/Passport Number						Date of Birth			/		/									
Nationality						Country of Birth														
Mobile Number			Home			Work			Email Address											
Residential Address																				
Postal Code		Country				State/Region														

C Letter Of Wishes ("LOW")

I/We being the settlor(s) as that term is defined in the Plan, am/are writing to you, as trustee of the Trust, to indicate my/our wishes as to the management and administration of and the application of income and capital I/we have contributed to the Trust. I/We am/are not in any way limiting or fettering the exercise of your discretion or in any way creating any binding trust or obligation or directions binding upon you in law but merely making you aware of how I/we would prefer the Trust Fund, as defined in the terms and conditions of the Plan ("**Terms and Conditions**"), be dealt with within the powers and discretions conferred upon you by the Trust. Furthermore, any and all my/our wishes should be made subject to the Terms and Conditions and also any due diligence process that may be required by you from time to time (including without limitation any anti-money laundering and know your client checks).

It is my wish that this Letter of Wishes shall not be shared with any of the beneficiaries of the Trust.

I/We agree that if there is more than one settlor and any settlor predeceases the other settlor, the surviving settlor can continue to write to you their wishes as to the management and administration of and the application of income and capital attributable to the relevant beneficiaries of the Trust. I/We also agree that if at any time, there is more than one surviving settlor, then any further letter of wishes will be signed by all such settlors. If not all such settlors sign on the further letter of wishes, then you can ignore such letter of wishes.

1. Exercise of discretionary powers

- 1.1) I/We would prefer that, in the exercise of all your powers and duties under the Trust and also with regard to the management and administration of the Trust Fund (including but without limitation the exercise of your powers to add persons to and/or delete persons from the class of eligible beneficiaries, you would consider my/our wishes, recommendations and suggestions in all matters concerning the Trust Fund, both as to income and capital, its management, administration, investment, distribution and the exercise of any of your discretionary powers and duties.

2. Option A (For Natural Person) Distribution of Income and/or Capital of the Trust Fund

- 2.1) It is my/our wish that you distribute the income and/or capital or part thereof of the Trust Fund to the First Tier Beneficiaries (if any) and, in absence of First Tier Beneficiaries, to the Second Tier Beneficiaries, on my/our request from time to time during my/our lifetime.
- 2.2) In the event of the death of all the Settlers and the value of the Trust Fund is more than or equal to SGD 100,000, it is my/our wish that the entire Trust Fund be distributed to the Second Tier Beneficiaries.
 - as a lump sum distribution: or
 - as a monthly distribution of SGD [REDACTED] (Minimum SGD 1,000) provided that once the value of the Trust Fund falls below SGD 10,000, it is my/our wish that you distribute the remaining Trust Fund to the Second Tier Beneficiaries, and the Trust be vested.

Plan Number

--	--	--	--	--	--	--	--	--	--

- 2.3) In the event of the death of all the Settlers and the value of the Trust Fund is less than SGD 100,000, it is my/our wish that the entire Trust Fund be distributed to the Second Tier Beneficiaries as a lump sum distribution and the Trust be vested.
- 2.4) For the purposes of paragraphs 2.2 and 2.3, it is my/our wish that the Trust Fund be distributed to the Second Tier Beneficiaries in the following proportions:

Name List of Beneficiary(ies)	Proportion %

- 2.5) If there is more than one Second Tier Beneficiary and any one Second Tier Beneficiary predeceases me/us or the other Second Tier Beneficiaries, it is my/our wish that the share of the deceased Second Tier Beneficiary be distributed to the surviving Second Tier Beneficiaries in equal shares.

2 Option B (For Trust Company) Lump Sum Distribution of Income and/or Capital of the Trust Fund

- 2.1) It is my/our wish that you distribute the income and/or capital or part thereof of the Trust Fund to the First Tier Beneficiaries (if any) and, in absence of First Tier Beneficiaries, to the Second Tier Beneficiaries, on my/our request from time to time during my/our lifetime.
- 2.2) In the event of the death of all the Settlers, it is my/our wish that the entire Trust Fund be fully distributed to the Second Tier Beneficiaries as a lump sum distribution and the Trust be vested.
The above wishes shall remain valid and in force until such time as they are superseded in writing by myself/ourselves.

The above wishes shall remain valid and in force until such time as they are superseded in writing by myself/ourselves.

D Declaration and Authorisation

1. By submitting this form, I/We agree and consent to Metis SG, and/or its appointed representatives and/or agents (and such other third-party service providers as it may engage, and who may be located outside Singapore) collecting, receiving, using, storing, disclosing and processing my/our Personal Data in accordance with the terms of the Terms and Conditions and Metis' privacy policy as amended from time to time, available at [https://metisgl.com.sg/media/1/docs/privacy_policy.pdf] ("**Privacy Policy**"), and the terms of Privacy Policy are incorporated into the Terms and Conditions by reference, and/or otherwise provided by Metis SG or possessed by us, for one or more of the following purposes:
 - a) processing this application
 - b) administering and/or managing our relationship and/or our account(s) with you.
 I/We further represent and warrant that:
 - a) all of the information provided by me/us to you (including without limitation personal particulars and contact information) is accurate and complete; and
 - b) if in connection with this form, I/we provide the personal data of any third parties, I/we further warrant and represent that these third parties have also consented to the terms of the Privacy Policy, and to the collection, receipt, use, storing, disclosure and processing of their personal data in accordance with the aforesaid.
2. Metis SG may rely conclusively upon and accept any instructions received via email or Metis SG's online portal (collectively "**electronic instructions**") which is in good faith believed to be genuine instructions signed by me/us. Any transactions made according to electronic instructions shall be irrevocable and binding upon me/us, whether such electronic instructions have in fact been given with or without my/our authority, knowledge, or consent. Under no circumstances shall Metis SG have any duty or any obligation to enquire or verify the identity of the person(s) giving electronic instructions in my/our name or the authenticity of the signature appearing thereon or the validity of the electronic instructions.

Plan Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

- I/We understand that sending electronic instructions is not a safe and reliable transmission method. Metis SG shall not, in any event, be liable to me/us for any liabilities, losses, damages, or expenses whatsoever arising out of or in connection with any network or telephone line failure, any uncontrollable events or any other circumstances beyond Metis SG's control.
- I/We understand that the updates will take effect only after Metis SG's acceptance and approval of the request and Metis will notify me of the effective date of the change.

Full Name of Settlor
(As in NRIC/FIN/Passport including any alias and other names)

--

Signature

--

Date Signed

		/			/				
--	--	---	--	--	---	--	--	--	--

(where applicable)

Full Name of Joint Settlor
(As in NRIC/FIN/Passport including any alias and other names)

--

Signature

--

Date Signed

		/			/				
--	--	---	--	--	---	--	--	--	--