



IMPORTANT INFORMATION

1. Please complete all relevant sections of this form.
2. Use block letters and tick the relevant blocks.
3. Please sign all alterations.
4. For transfers out, you or your financial adviser would need to email uttransactions@oldmutual.com the following required documents:
This form, completed and signed by you and, if applicable, your financial adviser.
A copy of the receiving fund's new business application form, signed by you.
5. For transfers into Old Mutual Unit Trusts Tax-Free Investment, your existing product provider will need your Tax-Free investment account details with us. Please submit a completed [Old Mutual Unit Trusts Tax-Free Investment application form](#) stating "source of funds for this transaction" as a transfer from your current provider. We will send you the reference details required to include in your submission to your current tax-free product provider.
6. Multiple transfers are allowed, within the same contract, per tax year. Transfers out are not allowed in the last 14 days of the tax year.
7. To start processing on the same day, the administrator must receive all completed instructions on any business day before 3pm (South African time). Any instructions received after 3pm will be processed on the next business day.
8. The administrator will only start processing when all requirements are met.
9. If another instruction or pending transaction is in progress, this instruction may be delayed until the first one is completed.

INVESTOR'S DETAILS

Title: Mr Ms Mrs Other Initials

First name(s):

Surname:

South African ID number

Tax reference number (if applicable):

Country of Tax Registration:

PRODUCT TO BE TRANSFERRED FROM

Product Provider name:

Tax Free Savings Account Product name:

Tax Free Savings Account number to be transferred from:

Estimated value of transfer: R

Contact person at Transferring Product Provider:

Email address:

Contact Number:

Transfer Amount: 100%/Full Transfer OR Partial Transfer*

If partial transfer is selected, please specify the amount to be transferred below:

Fund name	Rand Amount**	Or % Allocation
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %

* Partial transfers are only applicable to transfers to and from external product providers. Partial internal transfers are not allowed

** For rand amounts exceeding 95% of your Old Mutual Unit Trusts investment value, the full amount will need to be transferred

Note:

Please ensure that all of the transferring provider's requirements are met when submitting the Tax Free Savings Account Transfer Request Form to them. If these requirements are not met the transfer process cannot be commenced.



TRANSFER TO (TO BE COMPLETED BY THE RECEIVING PRODUCT PROVIDER)

Product Provider name:

Company Registration number:

Tax Reference Number:

Tax Free Savings Account Product name:

Tax Free Savings Account client number to be transferred into (if applicable):

Contact person:

Email address:

Phone number:

BANKING DETAILS

Bank:

Account number:

Branch Code:

Name of Account:

Payment Reference number:

ON BEHALF OF RECEIVING PRODUCT PROVIDER

We will accept the above Tax Free Savings Account transfer and confirm that:

- The above transfer request will be processed in terms of the Regulations published in terms of Section 12T(8) of the Income Tax Act; and
- The account to be transferred into is a Tax Free Savings Account as defined in Section 12T of the Income Tax Act.

Signature of representative

Name of Representative

Capacity of Representative

OFFICIAL STAMP

Date

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



INVESTOR DECLARATION

I UNDERSTAND AND ACCEPT THAT:

- All statements and details supplied on this form are correct as per my instructions.
- I have read, understood and accepted the terms, conditions and declarations in this form.

For transfers out:

- The price payable for the units to be disinvested in terms of the request will be the unit trust fund's ruling price on the business day that all required documentation is received by the administrator
- Disinvestment transactions may be subject to restrictions imposed by the management company(ies).

ACTING ON BEHALF OF THE CLIENT

Guardian/person with Power of Attorney acting on behalf of the client. Proof to be provided. (Additional information can be requested based on business requirements)

Title: Mr Ms Mrs Other Initials

First name(s):

Surname:

South African ID number:

Relationship to client:

CLIENT/GUARDIAN/PERSON WITH POWER OF ATTORNEY DECLARATION

- I hereby request that the above mentioned Tax Free Savings Account be transferred to the Product Provider and Product detailed above.
- I confirm that all the information provided above is true and correct.

Signature of investor

Date

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

CONTACT DETAILS

Old Mutual Unit Trust Managers (RF) (Pty) Ltd
 (Registration no. 65/08471/07)
 Mutualpark, Jan Smuts Drive, Pinelands 7405, South Africa
 PO Box 207, Cape Town 8000, South Africa
 Telephone no.: +27(0)21 503 1770
 Helpline: 0860 234 234
 Internet address: www.oldmutualinvest.com
 Email: unittrusts@oldmutual.com

Complaints may be directed to the Client Relationship Manager at the above address. Our complaints process is available via our website www.oldmutualinvest.com or by contacting 0860 234 234.

Compliance Department: +27(0)21 503 1770

Visit www.oldmutualinvest.com for unit trust information, prices and news. Log in to view your portfolio online.

Clients who select email as their preferred correspondence method benefit from an enhanced communication offering.

Old Mutual Investment Administrators (Pty) Ltd
 (Registration no. 1988/003478/07)
 Mutualpark, Jan Smuts Drive, Pinelands 7405, South Africa
 PO Box 5408, Cape Town 8000, South Africa
 Telephone no.: +27(0)21 503 1770
 Compliance Department: +27(0)21 503 1770

Professional indemnity cover and fidelity insurance cover are in place.

Old Mutual Investment Administrators (Pty) Ltd is a third party administration and service provider to Old Mutual Unit Trust Managers (RF) (Pty) Limited and is a licensed financial services provider.