

## **IMPORTANT INFORMATION**

- 1. Please ensure you complete section 1-6, 12 and 13 in full. Sections 7-10 are dependent on your investment requirements.
- The completed form can be scanned and emailed to <u>uttransactions@oldmutual.com</u>. Illegible and incomplete forms may lead to delays. Contact our Service Centre at 0860 234 234 if you have any queries.
- 3. Your investment will be made once we have received the completed form and supporting documentation and your money reflects in the correct bank account.
- 4. The Effective Annual Cost (EAC) is a standard industry measure for your information and to facilitate comparing the cost of an investment over specific periods. The EAC of your investment will be confirmed in writing once your investment has been processed.
- 5. Once your account has been opened, you can register via www.oldmutualinvest.com to view and/or transact on your portfolio.
- 6. All transaction forms including sell and switch instructions are also available on our website www.oldmutualinvest.com or from your financial adviser.
- 7. It is important to provide a cellphone number, as transaction notifications are only sent via SMS.

## SUPPORTING DOCUMENTATION REQUIREMENTS

Buying and selling requests require at least proof of identity (e.g. bar-coded ID/passport). Please refer to the document entitled "Supporting Document which may be required" (available on www.oldmutualinvest.com) for further information. The Financial Intelligence Centre Act (FICA) requires that the investor and all related parties are identified and verified before the investment is processed. We cannot process your application without the relevant information.

#### PROCESSING TIMES

The same day's price will be applied to transaction requests submitted by 15h00 (13h00 for all transactions involving money market funds) on any working day, provided that all supporting documents are provided and all FICA requirements\* have been met. Transaction requests received after these times will be processed the next available working day, once all requirements have been met, with the same cut-off times applying.

\* In line with FICA, Old Mutual Unit Trust Managers (RF) (Pty) Ltd has adopted a risk based approach to establish and verify the identity of individuals or entities it enters into business transactions with. This verification process may require for additional documentation. In the event of this, there may be a delay in processing your transaction instruction and in some instances this may result in the same day's price not being applied to instructions submitted by 15h00. The transaction will be applied once all additional verification processes have been completed.

#### Please complete this form using block letters and tick ( $\checkmark$ ) where appropriate.

#### **APPLICATION TO BUY UNITS**

I hereby apply for the number of units that can be purchased by the investment amount referred to below. All transactions are subject to the conditions of the relevant Trust Deed(s).

| Do you already have an Old Mutual Unit Trusts investment?                  | No | Yes Yes |
|--|----|---------|
| If Yes, please provide your unit trust number                              |    |         |
| Does this application to buy units include a Money Market Unit Trust Fund? | No | Yes     |

#### 1(a). INVESTOR'S DETAILS

| I am investing: For myse | If On behalf of someone else Please also complete section 1(b)                     |
|--------------------------|--|
| State relationship       |  |
| INDIVIDUAL IN WHOSE      | NAME INVESTMENT IS HELD  |
| Title and surname        |  |
| Full first names         |  |
| Gender: Male             | Female   |
| Marital status: Sing     | gle Married Divorced Widowed Other   |
| Marital status type: Con | Civil Marriage in Civil Marriage Civil Marriage with Accrual without Accrual Other |



# 1(a). INVESTOR'S DETAILS CONTINUED

## **Proof of Identity:**

| Type of Identificatio<br>(ID or Passport) Refu |           |               | ountr <u>)</u><br>O or p |        |        | Ð     |                 |              | ID/    | Pass   | por   | t nu | mbe     | er    |      | lssu    | ue d   | ie date |              |   |  |      | Ex    | piry | dat | e of | pas | spor     | t         |
|--|-----------|---------------|--------------------------|--------|--------|-------|-----------------|--------------|--------|--------|-------|------|---------|-------|------|---------|--------|---------|--------------|---|--|------|-------|------|-----|------|-----|----------|-----------|
|  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
|  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
|  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Other State                                    | type eg   | g. So         | ocial s                  | ecu    | rity r | um    | ber             |              |        |        |       |      |         |       |      |         |        |         | Cou<br>citiz |   |  |      |       |      |     |      |     |          |           |
| Country of birth:                              |           |               |                          |        |        |       |                 | intry<br>den |        |        |       |      |         |       |      |         |        |         | Cou<br>nati  |   |  |      |       |      |     |      |     |          |           |
| Contact details:                               |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Cellphone                                      | (For eg   | g. Sou        | uth Afr                  | ica +2 | 27)    |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
|  |           | -             |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Telephone (Home)                               | (For eg   | g. Sou        | uth Afr                  | ica +2 | 27)    |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Telephone (Work)                               |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Telephone (Work)                               | (For eg   | g. Sou        | ıth Afr                  | ica +2 | 27)    |       |                 |              | _      |        |       |      | _       |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| E-mail Address                                 |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Old  | Mutual    | Uni           | t Tru                    | sts'   | prefe  | erre  | d me            | tho          | d of   | con    | nmu   | nica | tion    | is e  | -mai | il      |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Preferred method of                            | commi     | inic          | ation                    |        | F      | E-ma  |                 |              |        |        | Po    | ct   |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Residential address                            | comme     |               | acioni                   |        |        |       | an L            |              |        |        | 10    | JU   |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Max a shalina a s                              |           |               | 6                        |        | (- (-) | *1    | -1              |              |        | 6-     |       |      | \* NI - |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| My address<br>* Care of: If you do not have    |           | DR<br>Itial a |                          |        |        |       | dress<br>d reau |              | or vou |        |       |      | o)* Na  |       |      | of thi  | s pers | son     |              |   |  |      |       |      |     |      |     |          |           |
| Address  |           |               |                          |        |        |       |                 |              | -      |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
|  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     | <u> </u> |           |
|  |           |               | <u> </u>                 |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  | 1    |       |      |     |      |     |          |           |
|  |           |               | <u> </u>                 |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  | Pos  | tal c | ode  |     |      |     |          |           |
| Country  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| Postal address, if diffe                       | rent fro  | om re         | eside                    | ntia   | ladd   | ress  | ;               |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| My address                                     | c         | DR            | Car                      | e of   | (c/o)  | * add | dress           |              |        | Ca     | re of | (c/o | )* Na   | me    |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
| * Care of: If you do not have                  | a residen | tial ad       | ddress                   | of yo  | ur ow  | n and | l requ          | ire fo       | r you  | r post | to be | dire | cted t  | o the | care | of this | s pers | on      |              |   |  |      |       |      |     |      |     |          |           |
| Address  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
|  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  |      |       |      |     |      |     |          |           |
|  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  | Por  | tal c | ode  |     |      |     |          | $\square$ |
| Country  |           |               |                          |        |        |       |                 |              |        |        |       |      |         |       |      |         |        |         |              |   |  | . 03 |       |      |     |      |     |          | $\square$ |
| Country  |           | 1             |                          | 1      |        |       | 1               |              |        | L      |       |      |         |       | L    |         |        |         | 1            | L |  |      |       |      | L   | L    | L   | L        |           |

# OLD MUTUAL UNIT TRUSTS INDIVIDUAL BUYING FORM

# 1(a). INVESTOR'S DETAILS CONTINUED

| EMPLOYMENT DET   | AILS   |                       |                  |         |        |            |       |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
|--|--|-----------------------|------------------|---------|--------|------------|-------|--------|--------|------|-------------------|----------------|---------------|-------|-------|--------------|------|----------------|---|-------|-----|------|-------|----------------|------|----|--|
| Employment<br>position:                                      | Managi   | ing direc             | tor/CE           | 0       |        | E          | Exec  | cutive | man    | -    | ement<br>Directo  |                |               | Seni  | or n  | nana         | agei | ment           |   |       |     | r    |       | on-s<br>agei   |      |    |  |
|  | For  | eman/Su               | pervis           | or      |        |            |       |        |        |      | ployee<br>gemen   |                |               |       | Se    | elf-ei       | mpl  | oyed           |   |       | Ret | red/ | Une   | empl           | loye | d  |  |
| Industry or nature of business:                              | Ac   | dministra<br>Suppor   |                  |         |        |            |       | Fores  | -      | -    | culture<br>Fishin |                | ]             | Art   |       |              |      | ment<br>ation  |   |       |     |      |       | ctior<br>Istru |      |    |  |
|  | Educ   | ation/He<br>and Soc   |                  |         |        |            | Fina  | ancia  | l and  | Ins  | suranc            | e              |               |       |       | Ho           | ospi | tality         | , |       |     | Im   | port  | s/Ex           | port | ts |  |
| Information/Commu  | inication  | n and Tec             | hnolo            | ду 🗌    |        |            |       |        | Manu   | ufa  | cturin            | g 🗌            | M             | 1inin | g ar  | nd Q         | uar  | rying          |   |       |     |      | Mc    | otor           | trad | e  |  |
|  | Non-Pr   | ofit Orga<br>۱/       | nisatio<br>NGO e |         |        |            |       |        | Othe   | er S | Service           | s              |               | Prof  | essio | onal         | Ser  | vices          |   |       | De  |      |       | lic Se<br>nd S |      |    |  |
|  | Put  | olic Secto            | or: Oth          | er      | In     |            |       |        |        |      | remen<br>istratio |                | Rea           | lesta | ate a | and          | Pro  | perty          | , |       |     |      |       | ence<br>oorat  |      |    |  |
| Transporti<br>(ex  |  | age and l<br>imports/ |                  |         |        |            |       |        |        | ι    | Utilitie          | s              | ]             |       | W     |              |      | e and<br>trade |   |       |     |      |       | I              | Non  | e  |  |
| Source of income:  | Ļ  | Annuity F             | Payme            | nt      | ]      |            |       |        | Со     | mr   | nissio            | n              | _             |       |       |              |      | ation          |   | ]     |     | Dis  | abili | ity G          | rant | ts |  |
|  |  | Gratui                | ties/Ti          | ps      |        | Inco       | me    | prote  | ection | n pa | aymen             | t              | Ind           | eper  |       |              |      | actor<br>roker |   |       |     |      | Inl   | herit          | anc  | e  |  |
|  | Main   | tenance               | Suppo            | ort     |        |            |       | М      | lonthl | ly P | Pensio            | n              |               |       |       |              | s    | alary          |   |       | Sc  | nola | rshij | p/Bu           | rsar | -y |  |
|  | Self-Employed/Third Party (Spouse/Partner/Other InvestmOwn BusinessFamily Member)Inc |                       |                  |         |        |            |       |        |        |      |                   |                | nents<br>come |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Source of funds for this transaction:                        |  |                       |                  |         |        |            |       |        | 5      |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| 1(b). DETAILS OF   | PERSO  | ON ACT                | ING C            | ON BE   | HAL    | .F Of      | = IN  | IVES   | TOR    |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Power of attorney  | c  | Curatorsh             | ip               |         |        | Leg        | gal g | guard  | lian   |      | ]                 | Pare           | nt            |       | (     | Othe         | er   |                |   |       |     |      |       |                |      |    |  |
| If parent, please indica                                     | ate whet   | her mind              | or lives         | with y  | /ou    | Ye         | s     |        | No     | ,    |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Please provide your pr                                       | oof of id  | entity (e.            | g. bar-          | coded   | ID/p   | asspc      | ort)  |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Title and surname  |  |                       |                  |         |        |            |       |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Full first names   |  |                       |                  |         |        |            |       |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Gender: Male Proof of Identity: Please provide copy(s)       |  | emale                 | docur            | nent(s) | ) with | this       | forr  | n      |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Type of Identificatio  |  | Country               |                  |         | ·      |            |       |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| (ID or Passport) Refugee (ID or passport) ID/Passport number |  |                       |                  |         |        |            |       |        |        | nber |                   | ไรรเ           | le d          | ate   |       |              |      |                | E | xpiry | dat | e of | t pas | spc            | ort  |    |  |
|  |  |                       |                  |         |        |            |       |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
|  |  |                       |                  |         |        |            |       |        |        |      |                   |                |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |
| Other State  | type eg  | . Social s            | ecurit           | y num   | ber    |            |       |        |        |      |                   |                |               |       |       | Cou<br>citiz |      | y of<br>ship:  |   |       |     |      |       |                |      |    |  |
| Country of<br>birth:   |  |                       |                  |         |        | ntry dence |       |        |        |      |                   |                |               |       |       | Cou<br>nati  |      |                |   |       |     |      |       |                |      |    |  |
| Are you registered for 1                                     | ax purp  | oses in So            | outh A           | frica?  | Yes    |            |       |        | Sou    | ıth  | Africa<br>ta      | n Inc<br>x nun |               |       |       |              |      |                |   |       |     |      |       |                |      |    |  |

# 1(b). DETAILS OF PERSON ACTING ON BEHALF OF INVESTOR CONTINUED

| Contact details:   |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|--|--|-----------|---------|--------|---------|-------|----------|----------|--------|----------|---------|-------|---------|---------|--------|---------|----------|--------|---------|-------|--------|--------|---------|-----|----------|-------|---------|--------|-------|
| Cellphone  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|  | (For eg  | g. Souti  | h Afrio | ca +27 | 7)      |       |          |          |        | -        |         |       |         | _       | -      |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Telephone (Home)   |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|  | (For eg  | g. Souti  | h Afrio | ca +27 | 7)      |       |          |          |        |          |         |       |         |         | 7      |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Telephone (Work)   |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|  | (For eg  | g. Souti  | h Afrio | ca +27 | 7)      |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| E-mail Address   |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Old I  | Mutual   | Unit      | Trus    | ts' p  | refer   | rred  | me       | thoo     | dof    | com      | mu      | nica  | tion    | is e-   | mai    | I       |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Preferred method of o  | commu  | unicat    | tion    |        | E       | -ma   | il       |          |        |          | Po      | st    |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Residential address  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Myaddress  | My address OR Care of (c/o)* address Care of (c/o)* Name   |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Care of: If you do not have a residential address of your own and require for your post to be directed to the care of this person  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Address  |  |           |         |        |         |       |          |          | , ·    |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Address  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|  | Postal code  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Country  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Postal address, if different from residential address  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Postal address, if diffe   | rent fro   | om res    | siden   | ntial  | addr    | ess   |          |          | _      |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| My address   | c  | DR        | Care    | e of ( | c/o)*   | add   | ress     |          |        | Cai      | re of   | (c/o  | )* Na   | me      |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| * Care of: If you do not have a  | a residen  | tial add  | dress c | of you | ir own  | and   | requi    | re for   | your   | post     | to be   | dire  | cted to | o the o | care o | of this | s pers   | on     |         |       |        |        |         |     |          |       |         |        |       |
| Address  | o not have a residential address of your own and require for your post to be directed to the care of this person |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
|  | _  |           |         |        |         | _     |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        | _     |
| Ĺ  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        | 1      |         |     |          |       |         |        |       |
| l  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        | Pos    | stal c  | ode |          |       |         |        |       |
| Country  |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| 2. HOW TO INVES  | т  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| Old Mutual Unit Trusts i   |  | rnoo      | bliga   | tion   | toac    | cor   | ot bo    |          | mini   | imu      | min     | vocti | mon     | ts an   | dro    | son     | as th    | o ria  | ht n    | ot to | deb    | vit or | r to ce | 250 | deb      | iting |         | . 2000 |       |
| under certain circumst   |  |           | -       |        |         | -     |          |          |        |          |         |       |         |         |        |         |          | eng    | III III | 51 10 | uec    | 11 01  | 1000    | ase | uebi     | ung   | your    | acco   | Juni  |
| Lump sum investment  | t  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| -  |  |           |         |        |         |       |          | _        |        |          |         |       |         |         |        | -       |          |        |         |       | M N    | Ν      | C (     | 2   | <u> </u> | [     |         |        |       |
| A Please debit my  |  |           |         |        | nk stat | omor  | at for t | R        |        | ionw     | ill bo  | OMU   |         | I follo | wod k  |         | on       | truct  | iund a  |       | at pur | mbor   |         |     |          |       |         |        |       |
|  | nce you v  | will view | vonyo   |        |         | enner |          | 1113 111 | Struct | .1011 VV | in be v |       |         | 010110  | weu i  | Jy you  | in unite | liusti | unu a   | ccoui | in nui | nber.  |         |     |          |       |         |        |       |
| OR   |  |           |         |        |         |       |          |          |        |          |         | _     |         |         |        |         |          |        |         |       |        |        |         |     |          |       |         |        |       |
| B I will transfer via  | EFT  | R         |         |        |         |       |          |          |        |          |         | iı    | nto C   | ld M    | lutu   | ial U   | nit T    | rust   | s' ba   | nk a  | acco   | unt    |         |     |          |       |         |        |       |
| • Email your complet   |  |           |         |        |         |       |          |          |        |          |         |       |         | ctio    | าร@    | oldr    | nutu     | ial.co | om.     |       |        |        |         |     |          |       |         |        |       |
| Once we have received account number Division of the second |  | -         |         |        |         |       |          |          |        | -        |         |       |         |         |        |         | -        |        |         |       |        |        |         |     | d yoı    | ur ur | nit tru | ust cl | ient  |
| <ul><li>account number. Pl</li><li>Please Email proof</li></ul>  |  | -         |         |        |         |       |          |          | -      |          |         |       |         |         |        | -       |          |        |         |       |        |        |         |     | und      | and   | 115.0   | )0 fo  | r oll |
| other Funds. Proof   |  |           |         |        |         |       |          |          |        |          |         |       |         |         |        |         |          | -      |         |       |        | -      |         |     |          |       |         |        |       |

investment will be processed according to the processing requirements set out on Page 1 of this form. For any further assistance in finalising your investment you may contact our Service Centre at 0860 234 234 or +27(0)21 503 1770.

29092020



# 2. HOW TO INVEST CONTINUED

| REGULAR INVESTMENT  |  |                                  |  |  |  |  |  |  |  |  |  |  |
|---|--|----------------------------------|--|--|--|--|--|--|--|--|--|--|
| Please select only one debit order date for your contract   |  |                                  |  |  |  |  |  |  |  |  |  |  |
| Please allow a  | t least 10 days' notice.                 |                                  |  |  |  |  |  |  |  |  |  |  |
| You can increase your debit order on the anniversary date of your investm                                       | ent contract to counteract the effects o | of inflation on your investment. |  |  |  |  |  |  |  |  |  |  |
| Please select a percentage increase: 5% 10% 15%   | or %                                     |                                  |  |  |  |  |  |  |  |  |  |  |
| Please click <u>here</u> to view the full range of Old Mutual Unit Trust funds available to you for investment. |  |                                  |  |  |  |  |  |  |  |  |  |  |
| Name your investment contract (e.g) John's Education/Overseas Trip  |  |                                  |  |  |  |  |  |  |  |  |  |  |
| UNIT TRUST NAME LUMP SUM AMOUNT DEBIT ORDER AMOUNT  |  |                                  |  |  |  |  |  |  |  |  |  |  |
|   |  |                                  |  |  |  |  |  |  |  |  |  |  |
|   |  |                                  |  |  |  |  |  |  |  |  |  |  |
|   |  |                                  |  |  |  |  |  |  |  |  |  |  |
|   |  |                                  |  |  |  |  |  |  |  |  |  |  |
|   | R  | R                                |  |  |  |  |  |  |  |  |  |  |
| DISTRIBUTIONS SELECTION:  |  |                                  |  |  |  |  |  |  |  |  |  |  |
| Payout Re-invest to existing  | fund account                             |                                  |  |  |  |  |  |  |  |  |  |  |
| Re-invest to new fund account Name of Fund Account:   |  |                                  |  |  |  |  |  |  |  |  |  |  |
|   |  |                                  |  |  |  |  |  |  |  |  |  |  |

## 3. TAX RESIDENCY DETAIL

As a financial institution we are obliged to comply with international agreements signed by our government aimed at combatting tax evasion. In terms of these agreements, we are required to collect information regarding where you are resident for tax purposes including the related tax reference numbers. If you are resident for tax purposes in a country other than South Africa, certain of your information will be reported to SARS who will automatically share this information with the participating countries where required.

Each country has its own rules for whether a person is resident for tax purposes or not. It is possible to be resident for tax purposes in more than one country. Depending on the rules of the country, tax residency may be determined by factors such as where you permanently live, where you were born, or if you live and work in the country for more than half the year. If you are a US citizen or hold a US passport or green card, you will also be considered resident for tax purposes in the US even if you live outside the US, unless you have given up your citizenship.

Please answer the following questions and complete your tax reference number(s) in the table below, along with details of your identifications and any other nationality or citizenship, providing identification for each country for which you are a resident for tax purposes.

|  | Yes | No | ntry o<br>siden | Humber picase select reason |  |  | pas | eign ID/<br>sport of<br>intry | ID type |  |
|--|-----|----|-----------------|-----------------------------|--|--|-----|-------------------------------|---------|--|
| Are you a resident for Tax purposes in South Africa?                   |     |    |                 |                             |  |  |     |                               |         |  |
| If YES please include your South African Income Tax<br>Number          |     |    |                 |                             |  |  |     |                               |         |  |
| Do you have a Value Added Tax (VAT) Number?                            |     |    |                 |                             |  |  |     |                               |         |  |
| If YES please include your VAT Number                                  |     |    |                 |                             |  |  |     |                               |         |  |
| Are you a citizen and/or tax resident of the United States of America? |     |    |                 |                             |  |  |     |                               |         |  |
| If "Yes", please provide the following information                     |     |    |                 |                             |  |  |     |                               |         |  |
| Are you a resident for <b>tax purposes</b> in any other country?       |     |    |                 |                             |  |  |     |                               |         |  |
| If "Yes", please provide the following information                     |     |    |                 |                             |  |  |     |                               |         |  |
| Country 1  |     |    |                 |                             |  |  |     |                               |         |  |
| Country 2  |     |    |                 |                             |  |  |     |                               |         |  |
| Country 3  |     |    |                 |                             |  |  |     |                               |         |  |

### TIN reason code table

| Reason | Description   | Please tick (√) | Why is TIN unobtainable |
|--------|---|-----------------|-------------------------|
| А      | The country/jurisdiction does not issue TINs to its residents   |                 |                         |
| в      | The Account Holder is otherwise unable to obtain a TIN or<br>equivalent number (Please explain why you are unable to<br>obtain a TIN if you have selected this reason)            |                 |                         |
| с      | No TIN is required. (Note. Only select this reason if the domestic<br>law of the relevant jurisdiction does not require the collection<br>of the TIN issued by such jurisdiction) |                 |                         |

I (Full Name)

. ID/Passport number

Date

certify that the information provided above is correct. If I am a tax resident of any country other than or in addition to South Africa, I have stated this above. I undertake to advise Old Mutual Unit Trust Managers (RF) (Pty) Ltd within 30 days should information contained in this form change.

Signature

DMM

# 4. CONFIRMATION OF TAX STATUS FOR WITHHOLDING TAX

|    | Old Mutual Unit Trusts requests investors as beneficial owners of the investment, or their authorised signatory on behalf of the beneficial owner/<br>investors to confirm your tax status to us in writing in the section provided below. This is to ensure that you receive the applicable tax exemption<br>or that your tax is at the applicable reduced rates for Dividends Tax and the Withholding tax on Interest. Should you not complete and sign this<br>section, until we are in possession of correctly completed and signed forms, Old Mutual Unit Trusts will be required to:<br>• Withhold Dividends Tax at the applicable rate stipulated in the legislation on all dividends, and if applicable<br>• Withhold tax at the applicable rate stipulated in the legislation, on all interest, subject to the tax Withholding Tax on Interest (applicable to tax<br>residents of a country other than South Africa). |
|----|--|
| •  | <ul> <li>WHO QUALIFIES FOR A DIVIDENDS TAX EXEMPTION?</li> <li>All investors qualify for an exemption from Dividends Tax on dividends distributed. However, qualification is not automatic and you have to complete the Declaration below confirming where you are resident for tax purposes.</li> <li>If you are resident for Tax purpose in South Africa, you should qualify for the para (I) exemption because: <ul> <li>a. Income declared by a Real Estate Investment Trust [REIT] is deemed a dividend and subject to normal Income Tax in the hands of a South African Tax Resident.</li> <li>b. Due to a South African Tax Resident being subject to normal tax on the income, exemption (I) would then apply for Dividend Tax.</li> </ul> </li> </ul>   |
|    | <ul> <li>If you are not resident for tax purposes in South Africa, but resident for tax purposes in another jurisdiction, the para (j) exemption should apply<br/>where instances of para (x), (y) or (z) do not.</li> </ul>   |
| Yc | o claim the benefit from a dividends tax exemption<br>but as the investor, as the beneficial owner of this investment, or the authorised signatory on behalf of the beneficial owner, need to indicate<br>show why the investor is exempt from dividends tax and to sign the declaration and undertaking provided below.<br>Par (j) – a person that is not a resident and the dividend is a dividend contemplated in paragraph (b) of the definition of "dividend" in  |
|    | – section 64D (i.e. a dividend on a foreign company's shares listed in SA, such as dual-listed shares) Par (I) – any person insofar as the dividend constitutes income of that person (i.e. falls into normal tax system)*   |
|    | Par (x) – Other  |
|    | Par (y) - Double Taxation Agreement  |
|    | Par (z) – Other international agreement  |
|    | DECLARATION IN TERMS OF SECTION 64FA(1)(A)(I), 64G(2)(A)(AA) OR 64H(2)(A)(AA) OF THE ACT:  |
|    | (full names in print please), the undersigned, hereby declare that dividends paid to   |
|    | the beneficial owner is exempt, or would have been exempt had it not been a distribution of an asset in specie, from the dividends tax<br>in terms of the paragraph of section 64F of the Act indicated above.   |
|    |  |
|    | Signature Date Date (Duly authorised to do so)   |
|    | Capacity of Signatory (if not the investor):   |
|    |  |
|    | UNDERTAKING IN TERMS OF SECTIONS 64FA(1)(A)(II), 64G(2)(A)(BB) OR 64H(2)(A)(BB) OF THE ACT:  |
|    | (full names in print please), the undersigned, undertake to inform the Withholding Agent in writing should the circumstances of the beneficial owner referred to in this declaration change.   |
|    |  |
|    | Signature Date Date  |
|    | Capacity of Signatory (if not the investor):   |
| ·  |  |
| RE | AIMS FOR DIVIDENDS TAX REDUCED RATES TO BE APPLIED*, EXEMPTION FROM THE WITHHOLDING TAX ON INTEREST OR FOR<br>DUCED RATES TO BE APPLIED IN RELATION TO THE WITHHOLDING TAX ON INTEREST* (*ONLY APPLICABLE TO PERSONS TAX<br>SIDENT IN A COUNTRY OTHER THAN SOUTH AFRICA)   |
|    | SIDENT IN A COUNTRY OTHER THAN SOUTH AFRICA)   |

I qualify for a reduced rate of Dividend Withholding Tax because a double tax agreement is in place. Please complete and sign the Declaration of Beneficial Owner Form in relation to Double Taxation Agreement relief available from www.oldmutualinvest.com or by calling the Service Centre at 0860 234 234 and return the signed form to Old Mutual Unit Trusts to claim the reduced rate of tax.



# 5. YOUR BANK DETAILS

Deductions cannot be made from credit cards. Debit orders can only be raised <u>from</u> your own account (except in the case of grandparents/parents investing on behalf of minors, or spouses investing on each other's behalf). Payments can only be made to the investor's own bank account.

## BANK DETAILS FOR FUNDING INVESTMENTS (You will fund this and all future payments from this account.) The payment is made:

| For myself On beh  | nalf of a | a mino  | or (as i | ndica | ated o | on p | bage | e 1)  |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
|--|-----------|---------|----------|-------|--------|------|------|-------|-------|------|-------|-------|-------|-------|-----|-------|------|------|--------|------|------|-------|-----|-----|--------|----|
| Surname of account holder  |           |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      | Init  | als |     |        |    |
| Bank and branch Branch code and account numbe  | <br>۲     |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| Account type:  | Curre     | ent     |          |       | S      | avir | ngs  |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| BANK DETAILS<br>This section is compulsory if this<br>We will pay dividends, proceeds o  |           |         |          |       |        |      |      |       |       | ount |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| Surname of account holder  |           |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      | Initi | als |     |        |    |
| Bank and branch  |           |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| Branch code and account numbe  | r         |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| Account type:  | Curre     | ent     |          |       | Si     | avir | ngs  |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| 6. AUTOMATED REGULAR   | WITH      | DRAV    | VALS     | (Ele  | cting  | l to | hav  | /e d  | istri | ibut | ions  | pai   | d ou  | ut is | not | con   | side | ered | l as a | a wi | thdr | awa   | I)  |     |        |    |
| Please sell units to the value of  | R         |         |          |       |        |      | fro  | om r  | ny    |      |       |       |       |       |     |       |      |      |        |      |      |       | F   | unc | l, eve | ry |
| month/quarter/six months/year (  | circle p  | ayme    | nt fre   | quen  | cy). S | tar  | ting |       |       |      |       |       |       |       | (c  | date) |      |      |        |      |      |       |     |     |        |    |
| SCHEDULED SWITCHES<br>Please note that only scheduled  | phased    | l switc | hes fr   | rom a | a Mon  | ey l | Marl | ket a | icco  | unt  | is ac | cept  | ted.  |       |     |       |      |      |        |      |      |       |     |     |        |    |
| Please sell units to the value of  | R         |         |          |       |        |      | fro  | om n  | ny №  | lone | y Ma  | arket | t Fur | nd,   |     |       |      |      |        |      |      |       |     |     |        |    |
| every month/quarter/six months/year (circle payment frequency). Starting (date).   |           |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| 7. OLD MUTUAL SHARI'AH-COMPLIANT FUND RANGE  |           |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |
| agree that any income deemed to be non-permissible by the Shari'ah Supervisory Board will be paid to the charitable trust elected by the Shari'ah<br>upervisory Board in line with the principles of Shari'ah and the supplemental deed of the unit trust. I acknowledge that this does not form part of my<br>noome and will not reflect on my tax certificate. |           |         |          |       |        |      |      |       |       |      |       |       |       |       |     |       |      |      |        |      |      |       |     |     |        |    |

D D M M C C Y Y

Signature of investor



### 8. ACCEPTANCE OF ADVICE

в

I am solely responsible for my investment choices and their associated outcomes, and acknowledge that I have entered into this transaction without obtaining financial advice as that is my preference. As a result no initial charge will be levied on any investment of R500 (the general unit trust minimum) or more.

# OR

I hereby confirm that, where applicable, the relevant intermediary (adviser or broker) has satisfied me that he/she is authorised to render financial services in respect of this product.

Do you want to appoint this intermediary as your Preferred Servicing Intermediary (PSI) for all your future Old Mutual financial services needs?

YES, I appoint and give the PSI access to information on all my existing Old Mutual financial services products.

NO, I will complete an Intermediary Appointment Note (IAN) selecting my servicing intermediary of preference per category of Old Mutual financial services product.

## 9. INSTRUCTION FOR PAYMENT OF ADVISER FEES (If applicable)

Note: Fees to the adviser can only be applied if this section is fully completed for all fees agreed.

### INITIAL ADVISER FEE

An initial adviser fee has been agreed as follows (subject to the maximums for each unit trust, stipulated on the unit trust fund fact sheet). The applicable amount will be deducted prior to the purchase of units.

% incl. VAT (max. 3.45% incl. VAT) for interest bearing, equity/multi asset unit trusts and all Shari'ah managed unit trusts, which is

(Note: If % and rand amount differ, the % holds.)

### ANNUAL ADVISER FEE

In addition, you may elect to pay an ongoing annual adviser fee. This fee is negotiated between yourself and your adviser or broker, and is over and above the initial adviser fee stipulated above.

| Yes No  |                                 |                                   |                             |
|---|---------------------------------|-----------------------------------|-----------------------------|
| If Yes, specify percentage % incl. VAT (max. <sup>-</sup>     | l.15% p.a. incl. VAT) of your d | iscretionary (non-retirement savi | ngs) unit trust portfolio.  |
| Note that this instruction overrides all existing annual advi | ser fee agreements.             |                                   |                             |
| A from  | Fund (one unit trust only)      | UT                                | (unit trust account number) |
| OR  |                                 |                                   |                             |
| B proportionally across all my unit trusts.                   |                                 |                                   |                             |

This annual fee is calculated as a percentage of the value of your discretionary or tax-free unit trust portfolio(s). All unit trust retail classes which make up the invested portfolio are included in this calculation. The annual adviser fee is deducted monthly, through the sale of units from the nominated unit trust/s. This is thus a capital gains tax event. If this fee is being paid from a single unit trust and there is at any time an insufficient number of units in the unit trust, the fee will automatically be deducted from your Money Market Fund, failing which, the largest unit trust in your portfolio. Where investments are held in more than one class in the same unit trust, the fee will be deducted from the class open to new business. You will receive confirmation of the implementation of this fee, any adjustments made to the annual percentage or to the unit trust, as well as the cancellation thereof. This fee is based on an agreement between the client and the Financial Planner. You need to take into account whether your Planner is VAT registered. Old Mutual Unit Trusts is not a party to the agreement and will cancel the fee on the written instruction of either party. The fee will further be automatically cancelled by a change in the appointed Financial Planner. Old Mutual Unit Trusts will change any erroneous instructions received, but will not rectify prior payments based on erroneous instruction.

(incl. VAT)

R



## **10. DECLARATION BY ADVISER/BROKER**

I, the undersigned, hereby declare and warrant that I am duly authorised to render financial services in respect of this product. All parties concerned have been identified and verified and all relevant documentation has been obtained and appropriate procedures have been applied in accordance with FICA (Act 38 of 2001). I confirm that all personal information is true and correct and there are no anomalies to my knowledge.

| Name of introducer         | Branch | Intermediary/Broker code Tel. no. |      |
|----------------------------|--------|-----------------------------------|------|
|                            |        |                                   |      |
| Introducer's email address |        | Signature of introd               | ucer |

## 11. PROTECTION OF PERSONAL INFORMATION

Old Mutual would like to offer you ongoing financial services and may use your personal information to provide you with information about product or services that may be suitable for your financial needs.

Please indicate here if you do not wish to receive this.

We may use your information or obtain information about you for the following purposes:

- Fraud prevention and detection
- Market research and statistical analysis
- Audit & record keeping purposes
- Compliance with legal & regulatory requirements
- · Verifying your identity
- · Sharing information with service providers we engage to process such information on our behalf or who renders services to us.

These service providers may be abroad, but we will not share your information with them unless we are satisfied that they have adequate security measures in place to protect your personal information.

You also have the right to complain to the Information Regulator, whose contact details are:

http://www.justice.gov.za/inforeg/index.html

Tel: 012 406 4818

Fax: 086 500 3351

Email: inforeg@justice.gov.za

You may access the personal information that we hold and request us to correct any errors or to delete this information. To view our full privacy notice and to exercise preferences, visit our website on www.oldmutualinvest.com.

## 12. DISCLAIMER

We aim to treat our clients fairly by giving you the information you need in as simple a way as possible to enable you to make informed decisions about your investments.

- We believe in the value of sound advice and so recommend that you consult a financial adviser before buying or selling unit trusts. You may however, buy and sell without the help of a financial adviser. If you do use a financial adviser, we remind you that they are entitled to certain negotiable adviser fees or commissions.
- You should ideally see unit trusts as a medium to long term investment. The fluctuations of particular investment strategies affect how a fund performs.
   Your fund value may go up or down. Therefore, we cannot guarantee the investment capital or return of your investment. How a fund has performed in the past does not necessarily indicate how it will perform in the future.
- Our cut-off time for client instructions (e.g. buying and selling) is at 15:00 each working day for all funds, except the Money Market Funds, which is at 13:00. These are also the times we value our funds to determine the daily ruling price (other than at month-end when we value the Old Mutual Index Funds and Old Mutual Multi-Managers Fund of Funds ranges at 17:00 close). Daily prices are available on our public website (www.oldmutualinvest.com) and in the media.
- The daily ruling price is based on the current market value of the fund's assets plus income minus expenses (NAV of the portfolio) divided by the number of units in issue.
- The fund fees and costs that we charge for managing your investment is accessible on the relevant fund's minimum disclosure document (MDD) or Table of fees and charges, both available on our public website (www.oldmutualinvest.com), or from our contact centre (0860 234 234).
- Additional information on this proposed investment can be obtained, free of charge, from our public website or our contact centre.
- Funds may borrow to pay client disinvestments and may engage in scrip lending. A process of ring-fencing of withdrawal instructions and managed
  pay-outs over time may be followed should excessive withdrawals from a fund place the fund under liquidity pressures.
- Old Mutual Unit Trust Managers (RF) (Pty) Ltd has the right to close a portfolio to new investors in order to manage it more efficiently in accordance with its mandate.
- Old Mutual Unit Trust Managers (RF) (Pty) Ltd is a registered manager in terms of the Collective Investment Schemes Control Act 45 of 2002.
- Old Mutual is a member of the Association for Savings & Investment South Africa (ASISA).

## 12. DISCLAIMER CONTINUED

#### Money Market Funds:

A Money Market Fund is not a bank deposit account. Its unit price aims to be constant but investment capital is not guaranteed. The total return is primarily made up of interest (declared daily at 13:00) but may also include any gain/loss on any particular instrument. In most cases this will merely have the effect of increasing or decreasing the daily yield, but in the case of abnormal losses, it can have the effect of reducing the capital value of the fund. The published yield is calculated using the average of the fund's previous seven days' net income (and assumes all income was reinvested). This figure is then annualised, which is the weighted average compound growth rate. A process of ring-fencing of withdrawal instructions and managed pay-outs over time may be followed should excessive withdrawals from a fund place the fund under liquidity pressures. **Income Funds:** 

Income funds derive their income primarily from interest-bearing instruments as defined. The published yield is a current yield and is calculated daily. The value of underlying assets of Income funds are marked to market on a daily basis.

#### Fund of Funds:

A fund of funds is a portfolio that invests in other funds in order to meet the investment objective of the fund of funds. Fund of funds can invest in local, foreign or offshore funds which levy their own charges, and may result in a higher fee structure.

#### Feeder Funds:

A feeder fund is a portfolio that invests all of its capital in a single underlying fund. This underlying fund can be a local, foreign or offshore fund and levy its own charges which may result in a higher fee structure.

### Third-Party Named Funds (co-branded):

Old Mutual Unit Trust Managers (RF) (Pty) Ltd is the manager of Adviceworx, Old Mutual Multi-Managers and Public Investment Corporation SOC Limited suites of co-branded funds and retains full legal accountability.

#### Funds holding foreign assets:

Some funds hold assets in foreign countries and therefore may have risks, in these countries, regarding liquidity, the repatriation of funds, political and macro-economic situations, foreign exchange, tax, settlement and the availability of information.

## 13. DECLARATION

### Signed by Investor or appointed person acting on behalf of the Investor as completed on Page 3 of this form.

- I agree to accept the number of units sold to me by virtue of this application and I warrant that I have full power and authority to enter into and conclude this transaction, with the necessary assistance where such assistance is a legal requirement.
- · I am aware that this product offers no cooling-off rights.
- I know that the cost of buying units may include an initial charge plus VAT, depending on the amount invested and whether or not I use an intermediary, and that there are no guarantees on my capital.
- I acknowledge that there are further allowable deductions from the unit trust/s (e.g. an annual service fee) that impact on the value of my investment.
   I am satisfied that the facts provided are accurate and complete. I am aware of the unit trust's/unit trusts' objectives, risk factors, the charges and income distributions, as set out in the unit trust fund fact sheet/s.
- I acknowledge that Old Mutual Unit Trust Managers (RF) (Pty) Ltd may borrow up to 10% of the portfolio to bridge insufficient liquidity.
- I have read and fully understood all the pages of this application form.
- I acknowledge that I am responsible for ensuring that my contact details are up to date and in the event of my assets being declared unclaimed, Old Mutual Unit Trust Managers (RF) (Pty) Ltd will take action to trace me. All such costs shall be borne by me and maybe deducted from the value of my investment on an ongoing basis or once I have been located.
- I hereby authorise Old Mutual Unit Trust Managers (RF) (Pty) Ltd to debit the account mentioned above with the monthly amount/lump sum specified.
- I further authorise Unit Trust Managers (RF) (Pty) Ltd to accept instructions from me via facsimile (please delete if not applicable).
- We aim to treat our clients fairly by giving you the information you need in as simple a way as possible to enable you to make informed decisions about your investments.
- I am aware that once my investment has been processed, Old Mutual Unit Trust Managers (RF) (Pty) Ltd will confirm the EAC to me in writing.
- I have read and am aware of the unit trust's/unit trusts' objectives, risk factors, the charges and income distributions, as set out in the unit trust fund fact sheet/s (Minimum Disclosure Document).
- I warrant that all the information given in this form, and in the additional documentation specifically requested by Old Mutual Unit Trust Managers (RF) (Pty) Ltd, as well as in any documentation which will be or has been supplied and signed by me in connection with this form, is true and correct and as per my instructions, whether in my handwriting or not.
- I undertake to advise Old Mutual Unit Trust Managers (RF) (Pty) Ltd within 30 days should information contained in this form change.
- I understand that Old Mutual Unit Trust Managers (RF) (Pty) Ltd may be legally obliged to disclose information in this form and in any other documentation supplied in connection with this contract to the South African Revenue Services and other legal authorities.
- I take note that in some instances, income may be reflected as "interest income" but accept that such income is fully Shari'ah compliant and has been approved as such by the Shari'ah Supervisory Board.

| Signed at (place)   | on (date)   |
|---|---|
| Signature of contracting party  | Signature of contracting party                                  |
|   |   |
|   |   |
| Signature of legal guardian/parent (if applicable) of contracting party | Signature of authorised person (on behalf of contracting party) |
|   |   |
|   |   |

D D M M C C Y Y

# 13. DECLARATION CONTINUED

## Supporting documentation which may be required

| CLIENT TYPE  | FICA IDENTIFICATION REQUIREMENTS   |  |
|--|--|--|
| Minors   | <ul> <li>Copy of valid green bar-coded identity document or identity card of parent(s)/legal guardian</li> <li>Copy of birth certificate/identity document of minor</li> <li>Copy of a valid passport for foreign nationals</li> <li>Proof of Residential address - less than 3 months old, of parent(s)/legal guardian as well as minor<br/>(if different)</li> <li>If a grandparent is the investor, we will require a copy of the Identity document of that grandparent<br/>proof of residential address as well as the documents for the parent(s)/legal guardian of the minor</li> </ul>  |  |
| Adults   | <ul> <li>Copy of the valid green bar-coded identity document or identity card or passport</li> <li>Proof of residential address, - less than 3 months old or a valid rental agreement or letter fror residence owner confirming residence</li> <li>Old Mutual Third Party Affidavit (only in exceptional instances)</li> </ul>   |  |
| Persons acting on behalf of another natural person | <ul> <li>Both the person acting on behalf of the client and the client must be verified</li> <li>Copy of valid green bar-coded identity document or identity card or passport for the person acting on behalf of the client - less than 3 months old.</li> <li>Proof of address for person acting on behalf of the client - less than 3 months old.</li> <li>Proof of authority to act on behalf of the entity or client, eg: <ul> <li>Power of attorney</li> <li>Mandate</li> <li>Resolution duly executed by authorised signatories</li> <li>Letter of executorships/authority from the Master of the High Court</li> <li>Court order</li> <li>Trust deed</li> </ul> </li> </ul> |  |

## CONTACT DETAILS

### Old Mutual Unit Trust Managers (RF) (Pty) Ltd

Registration no.: 65/08471/07 VAT no.: 4230116479 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: <u>www.oldmutualinvest.com</u> Email: <u>unittrusts@oldmutual.com</u>

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

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.

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.