

Sygnia Retirement Annuity Application Form

Document Checklist

South African bar-coded ID, valid passport (if foreign national) or birth certificate (if minor)

Proof of residential address less than 3 months old (Refer to Annexure A for examples)

Proof of banking details (e.g. bank statement)

Proof of deposit/transfer in to the relevant Sygnia bank account

If a unit transfer is required, please provide a recent statement of your current investment

For the authorised representative

South African bar-coded ID or valid passport (if foreign national)

Proof of authority to act (e.g. power of attorney)

Note: If you are completing this form online, please save the form to your computer prior to completing any details to ensure a copy is kept for your records. Please ensure that we receive a non-editable version of the completed and signed form.

- No instruction will be processed unless all requirements have been met, all relevant documentation received and the funds reflected in Sygnia's bank account.
- The daily cut-off for receipt of instructions is 14:00.
- Please read the Terms and Information document applicable to this investment. This is available from your financial advisor, the Sygnia Client Service Centre or www.sygnia.co.za.
- Completed forms and required documentation must be emailed to instructions@sfs.sygnia.co.za.
- Should you have any queries regarding this application, please contact your financial advisor, or alternatively the Sygnia Client Service Centre on 0860 794 642 (0860 SYGNIA).



Sygnia Financial Services (Pty) Ltd Registration No. 2010/015491/07

Cape Town: 7th Floor, The Foundry, Cardiff Street, Green Point, 8001 | T +27 21 446 4940 Johannesburg: Unit 40, 6th Floor, Katherine & West Building, West Street, Sandton, 2196 | T +27 10 595 0550 Durban: Office 2, 2nd Floor, Ridgeview, 1 Nokwe Avenue, Ridgeside, Umhlanga Ridge, 4319 | T +27 31 001 0650 info@sygnia.co.za | www.sygnia.co.za Sygnia Financial Services (Pty) Ltd is a licensed Financial Services Provider [FSP 44426]

Investor Details

| Title: | First name(s): | | Surname: | | | |
|------------------|-------------------------------|-------------|--|--------|-----|------|
| ID or Passport r | number (if foreign national): | | Passport country: | | | |
| Date of birth: | | | South African resider | nt: | Yes | No |
| Are you a regis | tered taxpayer? 🗌 Yes | No | If yes, specify your SouthAfrican income tax n | umber: | | |
| Occupation: | | | | | | |
| ls your postal a | ddress the same as your re | sidential a | ddress: Yes No | | | |
| Residential add | Iress: | | | | | |
| | | | | | Cc | ode: |
| Postal address: | · | | | | | |
| | | | | | Cc | ode: |
| Home telephon | ne number: () | | Work telephone number: (|) | | |
| Cellphone num | ber: | | Email: | | | |

Communication Preference

We will send all communication via email.

If you have a financial advisor, you may choose to have your communication sent to you, your financial advisor or to both.

Send communications to:

Me My financial advisor Both

If no selection is made we will send communication to you only.

Please keep me informed of the latest news, exclusive Sygnia Investor events and any additional products or services on offer via my chosen communication method above:



Manage and view your investment on the sygnia Online Platform

Once your funds have been invested and unitised, you will be able to register on the Sygnia Alchemy Online Platform to view your personal and investment detail:

online.sygnia.com/Account/Login

Within 5 business days of your investment being finalised, you will receive your log on details and Sygnia Welcome Pack. In order to grant you access to the platform and before registration can take place, an authentic email address will be required.



Details of Person Acting on Behalf of Investor

| * Capacity: | | |
|---|----------------------------------|-------|
| (* e.g. Guardians/Persons with Power of Attorney or mandate | e acting on behalf of investor.) | |
| Title: First name(s): | Surname: | |
| Occupation: | | |
| ID or Passport number (if foreign national): | Passport country: | |
| Residential address: | | |
| | | Code: |
| Postal address: | | |
| | | Code: |
| Home telephone number: () | Work telephone number: () | |
| Cellphone number: | _ Email: | |

Annual Administration Fee

The following administration fee applies depending on the investment funds that you have chosen:

| Sygnia Investments | Annual Administration Fee (EXCL VAT) | | | |
|----------------------------------|--------------------------------------|----------------|----------------------------------|--|
| Value of all Accounts | Sygnia Unit Trusts | Sygnia ETFs | External Unit Trusts and ETFs | |
| First R2 000 000 | 0.35% | 0.35% | 0.40%* | |
| Between R2 000 000 - R10 000 000 | 0.15% | 0.15% | 0.20%** | |
| Over R10 000 000 | 0.00% | 0.00% | 0.20%*** | |

* 0.40% (excl VAT) is levied on the proportionate value of the external-manager funds below R2 million.

** 0.20% (excl VAT) is levied on the proportionate value of the external-manager funds above R2 million.

*** 0.20% (excl VAT) is levied on the proportionate value of the external-manager funds above R10 million.

A seperate safe custody fee of 0.03% (ex. VAT) per annum applicable to ETFs will be charged.

Note: We consider all your investments when assessing the R2 million and R10 million threshold, including your investments in Sygnia funds. For fees relating to the underlying investment managers, please refer to the Sygnia Alchemy Funds document available on request, or online at www.sygnia.co.za.

Transferring Fund Details

| Registered name of transferring fund: | |
|---------------------------------------|------------------------------|
| FSCA fund registration number: | _ SARS fund approval number: |
| Name of administrator: | _ Contact telephone number: |
| Account number of transferring fund: | |



| Reason for transfer to the Retireme | ent Annuity Fund: |
|--|--|
| Transfer from another Retirement Annui | ty 🗌 Transfer from a Preservation Plan/Fund |
| Transfer from a Pension/Provident Func | Divorce order payment |
| Estimated investment amount: | |
| Rands: | Cents: |
| | d which were not previously tax deductable |
| | |
| Investment Details | |
| Source of Funds (compulsory) This information is required by legislation ar | nd Sygnia in order to invest your funds. |
| Existing Sygnia account Bonus | Savings Inheritance |
| Salary Transfer from another finance | cial services provider 🗌 Other |
| If other, please specify: | |
| | |
| Note: Sygnia Financial Services (Pty) Ltd re | serves the right to request proof of source of funds. |
| Lump Sum Contribution: Minimum R20 000 | (Minimum of R1000 if invested into the Sygnia Money Mark Class S1 or S2) |
| Will this be a unit transfer: | |
| Yes No | |
| Rands: | Cents: |
| Date of deposit/transfer: / | / |
| Electronic/Internet transfer (EFT): | Electronic/Internet transfers may take up to 2 days to reflect in the Sygnia Bank account. Sygnia Financial Services (Pty) Ltd requires proof of transfer or deposit before this application can be processed. |
| Electronic collection by Sygnia: | This is a once-off direct debit from your bank account and is restricted to R1 000 000 per day. Units bought with a direct debit can only be withdrawn after 32 business days. |
| Electronic collection to be collected from: | Investor's bank account |



Funds Selection

| Funds | Unitised Life Fund | | Unit Trust | Class | Rand Amount | | Doroonto | |
|--------|-----------------------|----|---------------|-------|-------------|-------|-----------|----|
| Fullus | Life Fund | | must | Class | Rand Amount | | Percentag | Je |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| | | or | | | R | or | | % |
| Total | | | | | R | Total | 1 0 0 | % |

Phasing-In

- The minimum amount for a phase-in is R100 000 and can only take place from the Sygnia Money Market Fund
- Phase-ins will be processed by the 7th of every month
- A new phase-in instruction must reach Sygnia by 14h00 five business days before the 7th of each month
- · Phase-ins recieved after the cut-off date will be scheduled to start the following month
- · Only one phase-in will be allowed per account

Do you require a phase-in:

Yes No

If the answer is yes:

over 3 months over 6 months over 12 months

Default phase-in Money Market Fund: The investment will be phased-in from the Sygnia Money Market Fund Class A.

Note: The Retirement Annuity Fund requires that your investment adheres to the following investment limits in terms of Regulation 28 of the Pension Funds Act: A maximum exposure of 75% to equity investments; 45% to international investments; 25% to property and 10% to hedge funds. In order to assist you in determining whether your investment complies with these limits, you can use the Regulation 28 compliance calculator on the Sygnia website www.sygnia.co.za or call the Sygnia Client Service Centre on 0860 794 642.

Debit Order Investment: Minimum R500 per month. Of this amount, the minimum investment amount in any ETF must be R250.

| Rands: | _ Cents: | per month |
|---|----------|-----------|
| Escalation rate per annum: 0% 5% 10% 15% | | |
| Commencement month: | | |
| Collection date: 1 st 15 th | | |
| Debit order to be collected from: Investor's bank account Third party bank ac | count | |



| | Unitised | Unit | | | |
|-------|-----------|-------|-------|-------------|----------------------|
| Funds | Life Fund | Trust | Class | Rand Amount | Percentage |
| | | or | R | | or % |
| | | or | R | | or % |
| | | or | R | | or % |
| | | or | R | | or % |
| | | or | R | | or % |
| | | or | R | | or % |
| | | or | R | | or // % |
| | | or | R | | or // % |
| | | or | R | | or % |
| | | or | R | | or % |
| | | or | R | | or // % |
| Total | | | R | | Total 1 0 0 % |

Investor Banking Details

The details specified below must be in the investor's name and will be used for all future banking transactions. Should any changes occur, the investor must notify Sygnia in writing.

| Bank: | Account number: | |
|---|-----------------|--|
| Branch: | Branch code: | |
| | | |
| Type of account: Current Transmission Savings | | |
| Name of account holder: | | |

Note: A recent bank statement must accompany this application form as confirmation of proof of bank details. No payments will be made to third parties (i.e. payments will only be made to the bank account in the name of the registered investor). Payments to credit cards or market-linked accounts are not permitted. The Administrator executes all payment instructions electronically to a South African bank account in the name of the investor. No payment will be made by cheque.

Third Party Banking Details

Sygnia

This section must be completed where a third party makes payment on behalf of the investor. In the event that the payment is a debit order/electronic collection the third party must provide Sygnia with authorisation by signing below.

| Bank: | | Account number: | |
|---|---------------------------------------|---|---------------------------|
| Branch: | | Branch code: | |
| Type of account: Current Transmission Sav | vings | | |
| Name of account holder: | | | |
| | | | |
| Note: A recent bank statement must accompany this made to third parties (i.e. payments will only be mad credit cards or market-linked accounts are not permit African bank account in the name of the investor. No | e to the bank acc ted. The Adminis | count in the name of the registere trator executes all payment instru | ed investor). Payments to |
| Signed at: c | on this | day of | _ year |
| Signature of third party: | | | |
| | | | |

Beneficiary Nominations

The beneficiary nominations contained in this application form supersede the beneficiary nominations in the policyholder's will. Should one of the primary beneficiaries predecease the investor and not be replaced, the deceased beneficiary's share will be divided equally between the surviving primary beneficiaries.

| | Beneficiary 1 | Beneficiary 2 |
|---|---------------|---------------|
| First name(s): | | |
| Surname: | | |
| Relationship: | | |
| ID/Passport number: | | |
| Percentage: | | |
| Postal address: | | |
| | | |
| Contact number: | | |
| Occupation: | | |
| | | |
| | Beneficiary 3 | Beneficiary 4 |
| First name(s): | Beneficiary 3 | Beneficiary 4 |
| First name(s): Surname: | Beneficiary 3 | Beneficiary 4 |
| | Beneficiary 3 | Beneficiary 4 |
| Surname: | Beneficiary 3 | Beneficiary 4 |
| Surname: Relationship: | Beneficiary 3 | Beneficiary 4 |
| Surname: Relationship: ID/Passport number: | Beneficiary 3 | Beneficiary 4 |
| Surname: Relationship: ID/Passport number: Percentage: | Beneficiary 3 | Beneficiary 4 |
| Surname: Relationship: ID/Passport number: Percentage: | Beneficiary 3 | Beneficiary 4 |

Sygnia Bank Account Details

If you prefer to do an electronic/internet transfer, we will provide our banking details once your application has been sucessfully verified. Proof of payment will be required.

Financial Services Provider Details

Financial advisor full name and surname: _

Financial Service Provider (FSP) name: ____

FSP registration number: _____

_____FSP code: ____



| Investor declaration (only applicable where an FSP holds a category II discretionary license) |
|---|
| I/we confirm that: |
| I/we have entered into a mandate with the FSP Yes No |
| The mandate gives the FSP discretion to act on my/your behalf Yes No |
| Signature of investor: |
| |
| Note: A copy of the signed mandate must accompany this application form |

FSP Declaration

I/We

- declare that I/we am/are a licensed Financial Service Provider(s) and have made the disclosures required in terms of the Financial Advisory and Intermediary Services Act, No. 37 of 2002, and subordinate legislation thereto, to the investor.
- warrant what I/we have established and verified the identity of the investor(s) (and persons acting on behalf of the investor) in accordance with the Financial Intelligence Centre Act, No. 38 of 2001 ("FICA") and subordinate legislation thereto, and I/we will keep records of such identification and verification according to the provisions of FICA.
- are not aware of any activities in which the investor is involved which may lead us to suspect or reasonably suspect that the investor is
 or may be involved in any unlawful activities or money laundering. Should we subsequently become aware of suspicions of this nature,
 we shall immediately inform Sygnia Financial Services (Pty) Ltd.
- I warrant and declare that I will not transact on my client's behalf without my client's prior consent and authorisation and that all transaction will be in line with my client's instructions and Record of Advice.

| Signed at: | on this | day of | year |
|---------------------------------|---------|--------|------|
| 0 | | | |
| Signature of financial advisor: | | | |

Investor declaration (only applicable where an FSP holds a category II discretionary license)

If your financial advisor holds a Category I licence with the FSCA, they are not licenced to exercise discretion and submit instructions on your behalf. However, you may authorise them to submit the following online instructions on your behalf:

- Once-off withdrawal instructions
- · Set-up new regular withdrawals and changes to existing regular withdrawals on my behalf, including amount, frequency, or fund allocation
- · Changes to beneficiaries where applicable
- · Additions to existing investment accounts
- · Switches between the investment allocation of existing investment accounts
- Set-up of new debit order details or change to existing debit order details, including the amount, frequency, escalation rate, date of collection or fund allocation

Please note

- · All once-off withdrawals and regular withdrawal amounts will be paid into your bank account on record.
- · Any changes in bank account details for once-off withdrawals and regular withdrawals, will always require your authorisation and signature.

Do you authorise your financial advisor to submit transaction on your behalf via Sygnia Online?

Please indicate the investment account(s) you authorise your Financial Advisor to transact on, on your behalf.

This account only

All accounts

No

Accounts specified below only



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| Account code | Account code | Account code |
|------------------------|----------------|--------------|
| | | |
| | | |
| | | |
| Signed at: | on this day of | year |
| Signature of investor: | | |

Financial Advice Fees

I hereby confirm that the Financial Advisor whose details are completed in the "Financial Services Advisor Details" section above, is my appointed Financial Advisor and agree to payment of fees as follows:

Initial advice fee: ______% excluding VAT (Negotiable to maximum 3% exclusive of VAT. Applied to each lump sum contribution and (Lump sum) deducted before investment is made).

| Initial advice fee: (Debit order) | _% excluding VAT (Negotiable to maximum 3% exclusive of VAT. Applied to each debit order contribution and deducted before investment is made). |
|--------------------------------------|--|
| Annual advice fee: | _% excluding VAT (Negotiable to a maximum of 1%) per annum of the market value of the investment portfolio, charged by way of unit reduction and paid to the Financial Advisor monthly in arrears (If an initial fee in excess of 1.50% has been deducted the annual fee is limited to 0.50% per annum.) This authority may be withdrawn by written notice to the Fund. |

Declaration by Investor

- · I/We acknowledge, understand and accept the Sygnia Terms and Information document.
- I/We consent to Sygnia processing my/our personal information as described in the Sygnia Terms and Information document.
 I/We further confirm that the information provided by me/us is true and correct and undertake to notify Sygnia should any of the information change.
- I/We acknowledge, understand and accept that Sygnia may use the information I/we have provided in this form for either of the following purposes:
 - > to effectively process my/our transactions;
 - to detect and prevent fraud;
 - > to comply with auditing and record-keeping requirements;
 - > to comply with legal and regulatory requirements;
 - to verify my/our identity;
 - to share information with service providers with whom Sygnia has a business agreement to process such information on Sygnia's behalf or to those who render services to Sygnia.
- I/we acknowledge and understand that I/we may access the personal information Sygnia have on record and that I/we may request that Sygnia correct any errors or delete my/our information.
- · I/we acknowledge and understand that I/we can view Sygnia's full privacy policy on Sygnia's website on www.sygnia.co.za.
- I/we confirm that I/we was/were provided with the Minimum Disclosure Document prior to transacting.
- I/We hereby instruct and authorise Sygnia or its assignees to draw against my account the lump sum electronic collection or debit order instruction, if applicable, from the bank account noted in this form (or any other bank or branch to which I may transfer my account).
- I/We hereby confirm that the Financial Advisor whose details are completed in the "Financial Advisor Details" section above, is my appointed Financial Advisor and agree to payment of fees per the "Financial Advisor Fees" section above.

| Signed at: | on this | day of | year | _ |
|------------------------|---------|--------|------|---|
| Signature of investor: | | | | - |
| | | | | |



Annexure A: FICA Documentation Required

The list below provides guidance of what documentation will be accepted as proof of residence / business address:

The document must clearly show the person's name, either initials & surname or first name & surname and physical address.

| Document description | Validity period |
|---|------------------------|
| General Account: | |
| Utility account i.e rates and taxes, water or electricity | Less than 3 months old |
| Educational institution account / registration letter | Less than 3 months old |
| Co-opt statement (i.e. farmers) | Less than 3 months old |
| Medical aid statement | Less than 3 months old |
| Mortgage statement from mortgage lender | Less than 6 months old |
| Telephone or cellular account (all networks) | Less than 3 months old |
| Valid SABC television license | Less than 1 year old |
| Bank statement | Less than 3 months old |
| Security Service Account (ADT etc) | Less than 3 months old |
| Subscription T.V Statement (DSTV) | Less than 3 months old |
| Retail accounts (Woolworths, Edgars, etc) | Less than 3 months old |
| A tax invoice issued by a regulatory body (e.g. SAICA) | Less than 1 year old |
| Government Issued Documents: | |
| Motor vehicle registration documents | Less than 1 year old |
| Court order | Less than 3 months old |
| Warrant of arrest | Less than 3 months old |
| SARS income tax return | Less than 1 year old |
| Documentation relating to UIF or Pension pay-out | Less than 3 months old |
| Insurance and Investments Documents: | |
| Medical Aid statement | Less than 1 year old |
| Life insurance document | Less than 1 year old |
| Short-term or long-term Insurance document | Less than 1 year old |
| Funeral policy document | Less than 1 year old |
| Investment statement- shares, portfolio or unit trust | Less than 1 year old |
| Lease/Rental/Franchise Agreement: | |
| Valid Agreement | |
| Other: | |
| Payslip | Most Recent |
| Letter from Employer (where employee resides on the premises) | Less than 3 months old |
| Tribal Village Authority Letter | Less than 3 months old |
| Letter From Your Local Municipal Councillor | Less than 3 months old |
| Affidavit That Confirms Your Address / cohabitation | Less than 6 months old |
| Letter from the Warden (where investor is incarcerated) | Less than 3 months old |
| Letter by the Trustees confirming Investor resides on trust property (letter of authority required as well) | Less than 3 months old |

If you do not have proof of residential addresss in your own name, the following will be accepted:

- Utility bill or any other acceptable proof of residence in your spouse's, partner's or parent's name;
- A copy of your spouse's, partner's or parent's South African bar-coded ID, valid passport (if foreign national);
- Confirmation of residential address by co-habitant or homeowner form, which is available on our website www. sygnia.co.za
- Affidavit from your spouse, partner or parent duly dated and commissioned accordingly.