Initial Investment
Living Annuity Plus

Nedgroup Structured Life Limited	10/10/1/0028

1. What you need to know

1. Before completing this form please read the latest relevant Investment Agreement, Fund Fact Sheet and Portfolio Characteristics document - which can be obtained from your financial planner or our Client Service Centre. To understand the charges that may be incurred when investing, please use the Effective Annual Cost calculator available at www.nedgroupinvestments.com.
2. Your investment will be invested into the unit trust portfolio class specified on the relevant Portfolio Characteristics document.
3. The daily cut-off for receipt of instructions is 14:00.
4. We will process your instruction once:
   - we have received, reviewed and accepted your completed and signed form and support documentation;
   - we have performed all checks, verifications and assessments required in terms of FICA; and lastly
   - the money reflects in our bank account.
5. Information filled in outside of the relevant fields will not be considered when processing your instruction.
6. Return the completed and signed form with the relevant supporting documents to us via email to **nedgroupinvestments@silica.net** (please print and sign the form before scanning and emailing it to us, as an authorised signature is required for processing).
7. If you have any questions about this form please contact your financial planner or our Client Service Centre on **0860 123 263** (from within RSA) or on **+27 21 416 6011** (from outside RSA).

2. Future transfers

- Transfers out are only permitted to other compulsory annuities that are either a life annuity or a hybrid annuity, subject to the percentage of the life component within the hybrid annuity comprising of at least the market value (less the policyholder's elected percentage to beneficiaries) and that the life annuity/life component that they transfer into may only be based on age and gender and may not be an enhanced annuity. (i.e. transfers to a living annuity without an accepted life component is not permitted).
- The Insurer may choose to permit other transfers out, however this will be at the sole discretion of the Insurer.
- Should the Insurer waive the transfer restriction, such a waive should not be construed as being granted in future.

3. Online Access to Your Investment

Information regarding your investment may also be accessed from our secure site. Once you have received your investor number, you may register on the Nedgroup Investments website. To access the site go to www.nedgroupinvestments.co.za and click on 'Register/Login' in the top right hand corner of the landing page.

Please note

- We will need to have a valid cell phone number and email address on record in order for you to register successfully.

4. Investor details

Please note

- All fields must be completed in order to process your instruction.
- If you are completing this on behalf of an investor, please complete and attach the Appoint a person to act on your behalf form, available from our website.

INVESTOR TYPE

☐ South African individual

PERSONAL DETAILS

Title and surname

First names

Preferred name

Date of birth D D M M Y Y Y Y Gender

SA ID number

Passport number (if foreign national)

Passport expiry date D D M M Y Y Y Y Passport country of issue

Nationality Country of birth

CONTACT DETAILS

Cell (mandatory) + (0)

Email address

Please note

- This email address will be used for correspondence pertaining to this investment.
- Should you not complete this field, please acknowledge and accept that you will not receive email notifications about this investment. ☐

Alternate telephone + (0)

Residential address

Code

Country South Africa

If other

Postal address (if different)

Code

Country South Africa

If other

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5. Income, tax and residency

TAX STATUS

Is South Africa your country of primary tax residence? ☐ Yes ☐ No

Are you registered to pay tax in South Africa? ☐ Yes ☐ No

If yes, tax number: ☐☐☐☐☐☐☐☐☐☐

RESIDENCY STATUS

Please indicate your residency status:

☐ **Permanent resident (including citizen)** - you are a permanent resident of South Africa or the Common Monetary Area (i.e. Namibia, Swaziland and Lesotho).

☐ **Non-resident** - you have never lived in South Africa or the Common Monetary Area.

☐ **Emigrant** - you have formally emigrated from South Africa or the Common Monetary Area via a local authorised foreign exchange dealer and your emigration has been placed on record with the South African Reserve Bank. (If you are an emigrant, please complete the 'Blocked rand or non transferable account' form.)

INCOME VERIFICATION

This information is an anti-money laundering requirement prescribed by the Financial Intelligence Centre Act, 38 of 2001 (FICA). Supporting documentation may be requested.

WHAT IS YOUR SOURCE OF WEALTH?

☐ Salary / Commission
☐ Business earnings
☐ Pension / Annuity
☐ Inheritance / Donation / Trust
☐ Court order / Maintenance
☐ Self-employed

WHAT IS YOUR OCCUPATION?

☐ Government employee / Judge
☐ Executive
☐ Administration
☐ Arts, performance and hospitality
☐ Self-employed
☐ Unemployed
☐ Professional, scientific and technical services
☐ Academic
☐ Sales and marketing
☐ Crafter, trader or artisan
☐ Religious leader
☐ Management
☐ Technical and sciences
☐ Safety and security personnel
☐ Sport professional
☐ Retired

Other: ____________________

WHAT INDUSTRY DO YOU WORK IN?

☐ Financial, investment and insurance activities
☐ Information, technology and communication
☐ Accommodation and hospitality services
☐ Wholesale and retail trade
☐ Arts, entertainment and recreation
☐ Craft, trade or artisanal
☐ Manufacturing
☐ Construction
☐ Non-profit / religious
☐ Government, Municipal services or SOE
☐ Unemployed
☐ Professional, scientific and technical services
☐ Administrative and support services
☐ Human health, social work and education
☐ Transportation and storage
☐ Real estate
☐ Sport
☐ Mining
☐ Agriculture, forestry and fishing
☐ Gambling
☐ Public administration, defence and social security

6. Preferred correspondence

We will send you, or the person acting on your behalf, all correspondence (e.g. statements, fund updates, ballot letters pertaining to your investment) via email. If you haven't provided an email address your quarterly statement will be sent via SMS.

You may choose who receives your quarterly investment statement:

☐ You / the person acting on your behalf ☐ Your financial planner ☐ Both

You will receive our quarterly Insights newsletter if you have provided an email address.

I do not want to receive the quarterly Insights newsletter ☐

Would you like to receive information about new and/or existing Nedgroup Investments products? Yes ☐ No ☐

Would you like to receive information from the Nedbank Group about their financial services products? Yes ☐ No ☐

Would you participate in research run by research organisations to improve our service offering to you? Yes ☐ No ☐

7. Beneficiary nominations

FIRST BENEFICIARY

Percentage allocation (no decimals) ___ % Relationship

If beneficiary is an individual

Title and surname

First names

SA ID number

Date of birth

D D M M Y Y Y Y

Passport number (if foreign national)

Nationality

Passport expiry date

D D M M Y Y Y Y

If beneficiary is a legal entity

Registered name

Registration number

SECOND BENEFICIARY

Percentage allocation (no decimals) ___ % Relationship

If beneficiary is an individual

Title and surname

First names

SA ID number

Date of birth

D D M M Y Y Y Y

Passport number (if foreign national)

Nationality

Passport expiry date

D D M M Y Y Y Y

If beneficiary is a legal entity

Registered name

Registration number

If you would like to nominate additional beneficiaries, please attach a separate list signed by the investor detailing the information required above.

8. Investment details

INTENDED PURPOSE OF INVESTMENT

☐ Invest for over 5 years

NATURE OF RELATIONSHIP WITH NEDGROUP INVESTMENTS

☐ Invest a single amount with frequent withdrawals

INVESTMENT DETAILS

Estimated investment amount R ____________

Transferring from: ☐ Pension Fund ☐ Provident Fund ☐ Pension Preservation Fund

☐ Provident Preservation Fund ☐ Retirement Annuity Fund

☐ Existing living annuity from another insurer (please submit directive 135 documentation)

☐ Fund owned annuity to member owned (please submit section 14 documentation)

If this investment is as the result of a transfer from an existing living annuity from another insurer or a fund-owned annuity, please complete this section.

Full name of transferor institution (Administrator) ____________

Registered name of transferor fund ____________

Transferor fund reference / investor number ☐☐☐☐☐☐☐☐☐

HOW ARE YOU FUNDING THIS TRANSACTION?

☐ Transfer in

UNIT TRUST PORTFOLIO SELECTION

Please note:

- Monthly income distributions will be reinvested (after tax if applicable).

		Only applicable if investing with a Financial Planner	
Unit trust portfolio	**% allocation**	**Initial fee (excl VAT)**	**Annual fee (excl VAT)**

FINANCIAL PLANNING FEES

- If no fees have been specified, 0% will apply.
- If a fee is higher than the maximum specified, the maximum will apply

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PERCENTAGE ALLOCATION FOR DEATH BENEFIT

Would you like to apply the 5-year exclusion? ☐ Yes* ☐ No

This means that 100% will be paid to your dependents on death, if this occurs within the first 5 years.
This also means you will not receive any top-ups during this time.

* Even if you select yes, you still need to provide the elected percentages which will come into effect after 5 years.

☐ % - Elected percentage is the percentage of your market value to be allocated to your beneficiaries on death.

☐ % - Remaining percentage is the percentage that will be deducted from your market value prior to your death claim being processed, thereby reducing your death benefit.

9. Income payment details

TRANSFER OTHER THAN ON ANNIVERSARY

Is this investment as a result of transfer of an existing living annuity from another insurer? ☐ Yes ☐ No

If yes, what is your current income payment frequency? ☐ Monthly in arrears ☐ Quarterly in advance ☐ Bi-annually in advance ☐ Annually in advance

Please note

- If your current payment frequency is in arrears (except monthly), you will not be able to transfer your existing living annuity unless the existing insurer has changed the payment frequency to 'in advance' before the transfer to the Living Annuity.
- Your living annuity income may only be changed annually on the anniversary of the original purchase. On transfer to the Living Annuity your income and anniversary details will remain the same. Your income may be adjusted in the next anniversary month.

TRANSFER OF ANNIVERSARY ON DATE AND PURCHASE OF LIVING ANNUITY

Frequency choice		Income requirement	
Select one		Percentage OR Rand amount (before tax)	
✓		%	R
☐	Monthly in arrears		
☐	Quarterly in advance		
☐	Bi-annually in advance		
☐	Annually in advance		

Please note

- Regardless of whether you choose a rand amount or a percentage, your income must fall within the regulatory limits of 2.5% and 17.5% per year (both subject to change by the regulatory authority and / or legislation).
- The income from your Living Annuity account group may only be amended annually on income anniversary month.

Please indicate a required tax rate if different from the standard tax tables: ☐☐☐ %

Please note

- If not indicated, tax will be deducted in accordance with income tax legislation.
- If a tax rate lower than the rate applicable in terms of the tax tables is required, a tax directive must be submitted with this form. This directive will be valid only for the period stipulated thereon. You may renew this by applying to SARS. If a new updated tax directive is not received prior to the expiry of the outdated one, normal tax table rates will apply.

Should withdrawals to fund your income be made proportionally from all unit trust portfolios? ☐ Yes ☐ No

If no, please specify the unit trust portfolio(s) from which withdrawals are to be made.

Unit trust portfolio	Percentage allocation
	%
	%
	%
Total (must equal 100%)	%

Please note

- Should the value of the unit trust portfolio(s) selected become depleted, withdrawals will be processed proportionately from the remaining unit trust portfolios.

10. Investor bank account details

It is mandatory to complete this section.

Please note

- No third party payments will be processed.
- Payments will be delayed if the name of the account holder as registered with the bank is different from that completed below.

Name of account holder (as registered with bank) ____

Name of bank ____

Account number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Name of branch ____ Branch code ____

Account type ☐ Current ☐ Savings Country ____

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11. Financial planner details and declaration

Did the investor use the My Retirement Solution tool ☐ Yes ☐ No

Name of financial planning business

Name of financial planner Code

Contact number + (0)

I confirm that:

- I have made the disclosures required in terms of the Financial Advisory and Intermediary Services Act, 37 of 2002 (FAIS) to the investor.
- I have explained all fees that relate to this investment to the investor.
- I am authorised by the financial planning business to sell this investment / product in terms of FAIS.

Financial planner signature

Date D D M M Y Y Y Y

12. Complete only if the investor is a Nedbank employee or direct family member of a Nedbank employee

Nedbank employee number

If not a Nedbank employee, please specify the relationship to Nedbank employee

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13. Investor declaration

I confirm and certify that:

- I am responsible for my investment decisions and have considered whether this investment is right for my needs.
- I confirm that all information provided in this application is true and correct and that I am not aware of any other information that may affect this application negatively.
- Where I am acting on behalf of another person, or as a representative of a legal entity, I confirm that I am duly authorised to complete and sign this form.
- I understand and agree that this application will be governed by the relevant and latest Investment Agreement and I have read and understood the Portfolio Characteristics document and the fund fact sheet that relates to the unit trust portfolios I am investing in.
- I have used the Effective Annual Cost calculator and I am aware of the charges that may be incurred.
- I authorise Nedgroup Investments to accept this instruction as submitted (electronically or otherwise) and agree that Nedgroup Investments will not be held liable for acting on this application and/or any instructions contained herein.
- The information contained in this form may be reported to the South African tax authorities.

Where the financial planning details section has been completed:

- The financial planning business is my appointed financial planning business until I instruct otherwise.
- The financial planner listed, as authorised representative of the financial planning business, is my appointed financial planner.
- My appointed financial planning business must be paid the initial and annual financial planning fees.
- Annual financial planning fees may be recovered via the sale of units from my investment and paid to my financial planning business as long as it remains registered to render services in respect of my investment.
- My appointed financial planning business will have access to my investment details via Nedgroup Investments' secure online website.

Investor / Authorised signatory

Date D D M M Y Y Y Y

Name

Capacity