

UNIT TRUST INVESTMENT APPLICATION FORM

IMPORTANT INFORMATION

1. Itransact Fund Managers (RF) (Pty) Ltd, or IFM, is the Manager of this investment and is referred to herein as “the Manager”.
2. Automated Outsourcing Services (Pty) Ltd is an authorised Financial Services Provider and is the administrator of this investment. It is referred to herein as “the Administrator”.
3. **Please send your signed application form and supporting documents to the Manager by either Fax 011 561 6812 or Email admin@itransactfm.co.za.**
4. The responsibility of transmitting the documents to the Manager lies with the sender. No Fund application form is considered complete without all required documentation associated to this Fund.
5. **The most recent terms and conditions associated to this Fund (and any additional document referred to in clause 2 thereof) form part of this application. It is the Investor/s or their duly authorised person/s responsibility to read and understand the terms and conditions, as well as such other documents that are the basis for investment into this Fund, before signing this application form. The terms and conditions of this Fund are available from the IFM investor support centre during business hours on 0861 11 60 75. Alternatively, you may view the terms and conditions of this Fund at www.itransactfm.co.za or at Itransact Fund Managers’ physical address stated in Section 10.**

SECTION 1: INVESTOR DETAILS

Type of Entity Listed Company Unlisted Company Trust RA/ILLA/Pres.Fund LISP

Pension/Provident Fund FoF Close Corporation Government Entity LT Insurer

Manco Medical Scheme Partnership Retirement Fund

Other

Trading Name (If a legal entity)

Registered Name

Company/Trust Registration Number

Country of Incorporation

Resident of South Africa Yes No

Date of Incorporation/Registration

Income Tax Number

Withholdings Tax Status (if applicable) Exempt Not Exempt (If you selected Exempt, please complete the administrators Dividend Tax Declaration Form.)

VAT Registration Number

Trading Address

Code

Tick if postal address is same as trading

Postal Address

Code

Contact Number

Alternative Contact Number

Email Address

SECTION 2: AUTHORISED SIGNATORY OF THE LEGAL ENTITY

The details of the authorised signatory who is responsible for the investment must be completed here.

Title Mr Ms Mrs Dr Prof The Hon
First Name
Surname
Identity/Passport Number
Capacity
Telephone Number
Cellphone Number
Email Address

SECTION 3: TAX RESIDENCY SELF CERTIFICATION

Foreign Account Tax Compliance Act (FATCA)

The Foreign Account Tax Compliance Act (FATCA) is a United States federal law requiring United States persons (including those living outside the U.S.) to have yearly reported themselves and their non-US financial accounts to the Financial Crimes Enforcement Network (FINCEN), and requires all non-US (Foreign) Financial Institutions (FFI's) to search their records for suspected US persons for reporting their assets and identities to the US Treasury)

Common Reporting Standard (CRS) Reporting

CRS is a global standard developed by the Organisation of Economic Co-operation and Development (OECD) for the automatic exchange of financial account information between tax authorities worldwide. CRS Regulations were issued by SARS under the Tax Administration Act, 2011, which requires Financial Institutions residents in SA to apply the prescribed due diligence requirements to find reportable accounts and report the prescribed information.

Is the Juristic person or its beneficiaries or shareholders registered for tax in another country other than South Africa? Yes No

Is your Country of birth or Nationality of any other beneficiaries or shareholders not South Africa?

Yes No

If you have answered 'Yes' to any of the previous questions, please complete the 'Tax Residency Self Certification Form' available from the IFM Investor Support Centre and/or its website.

SECTION 4: METHODS OF COMMUNICATION, PROTECTION & PRIVACY OF PERSONAL INFORMATION

Method of communication

In order to view and access your transaction history and download statements, please register for online access at <http://s-ibrowse:7744/i-Browse/>.

Please note that email will be used as the preferred method of communication by the Manager. Communication with the Manager by the Investor can be via electronic means, which includes email, fax and telephonic communications, or by standard post, using the details provided in Section 11 below.

Privacy of Personal Information

Itransact Fund Managers (RF)(Pty)Ltd has adopted a Protection of Personal Information Policy that sets out how it may use your personal information or obtain information about you. You may access information about you that is held by the Manager and request that any errors are corrected or the information be deleted. Please view the full Privacy notice on IFM's website.

SECTION 5: GENERAL INVESTMENT DETAILS

Source of Funds

Salary Policy Donation Saving Investment
 Inheritance Other (Please Specify below)

*Kindly refer to the latest Minimum Disclosure Document for investment minimums.

SECTION 6: INVESTMENT DETAILS

FUND SELECTION

Fund Names	Class	Lump Sum Amount	Recurring Contribution	Annual Increase
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Lump Sum Amount		<input type="text"/>		

Additional Notes

- Distributions of less than R100.00, will automatically be re-invested;

Recurring Contribution Information (please mark selection)

Investment Intervals Monthly Quarterly Half Yearly Annually

Debit Orders are collected on the 1st of the month.

Distribution Instructions Reinvest Payout

Method of Payment (No cheques or cash accepted)

Select one method below

Monthly Debit Order
Complete the debit order details below

Electronic Collection by IFM (Maximum R1,000,000)
IFM will debit your account within two business days of receiving the application form and all relevant documents.

Electronic Internet Transfer
You will receive a confirmation letter once your investor account has been opened. The bank details to use for your transfer will be confirmed in this letter. Note that electronic/internet transfers may take up to two days to appear in the Manager's inflow bank account and will only be processed upon proof of deposit. Please furnish IFM with proof of deposit via email or facsimile (see Section 11 below).

SECTION 7: INVESTOR BANK DETAILS

This bank account must be a South African bank account in the name of the investor/ legal entity

Name of Account Holder	<input type="text"/>
Name of Bank	<input type="text"/>
Account Number	<input type="text"/>
Branch Name	<input type="text"/>
Branch Code	<input type="text"/>
Account Type	<input type="text"/>

Tick box if debit order bank details are the same as the investor bank details above

Name of Account Holder	<input type="text"/>
Name of Bank	<input type="text"/>
Account Number	<input type="text"/>
Branch Name	<input type="text"/>
Branch Code	<input type="text"/>
Account Type	<input type="text"/>

Debit Order Authority

1. I/We hereby request, instruct and authorise Itransact Fund Managers (RF) (Pty) Ltd, its successors or its assignees ("the Manager") to draw against my/our account with the bank noted above (or any bank or branch to which I/we may transfer my/our account).
2. I/We understand that all such withdrawals from my/our bank account shall be treated as though they have been signed by me/us personally.
3. I/We agree to pay any bank charges and costs relating to the debit order authority, including debit order rejection fees.
4. I/We acknowledge that I/we may cancel this authority by giving the Manager not less than 10 business days' written notice.
5. I/We agree that receipt of this instruction by the Manager shall be regarded as receipt thereof by my/our bank.
6. I/We acknowledge that in order to activate the debit order, the Manager must receive the debit order authority at least 10 business days prior to the first debit order date.

Fees and Charges

I/We acknowledge that the following fees and charges apply to investments made in the Fund:

1. An Initial Financial Advisor Fee, as specified below, may apply where the Investor has appointed a Financial Services Provider. This fee can be a maximum of 3% of the value of investments made in the Product, excluding VAT, and is negotiated between the Investor and the Financial Services Provider. This fee shall be payable by the Manager on behalf of the Investor to the Financial Services Provider.

Initial Financial Advisor Fee % (Maximum of 3% excluding VAT)

2. An Annual Financial Advisor Fee, as specified below, may apply where the Investor has appointed a Financial Services Provider. This fee can be a maximum of 1% per annum of the value of investments held, excluding VAT, and is negotiated between the Investor and the Financial Services Provider. This fee shall be payable by the Manager on behalf of the Investor to the Financial Services Provider. The fee shall be calculated as a percentage of the daily market value of the investments held by the Investor and paid monthly, in accordance with the terms and conditions of this Product.

Annual Financial Advisor Fee % (Maximum of 1% excluding VAT)

Further conditions applicable to fees and charges

- Fees and charges specified above are subject to the terms and conditions contained in the application form.
- Fees and charges are subject to change (see terms and conditions).
- Value added tax shall be charged on a fees and levies where applicable.

Product Terms and Conditions

Specify the version number of the most recent terms and conditions related to this Product
Note that without the correct version specified below, this application cannot be processed.

VERSION - IFM - IND .

Date (ddmmyyy)

Authorised Signatory

Print Initials and Surname

SECTION 9 FINANCIAL ADVISOR DETAILS AND DECLARATION

Full name and surname

Financial Services Provider (FSP) Name

FSP licence number

Financial advisor code (with IFM)

Contact Number

Email address

I/We

1. declare that I/we am/are a licensed Financial Service Provider(s) and have made the disclosures required in terms of the Collective Investment Schemes Control Act, 2002, and the Financial Advisory and Intermediary Services Act, No.37 of 2002, and subordinate legislation thereto, to the investor;
2. acknowledge and confirm that, in my/our capacity as the primary accountable institution with Itransact Fund Managers (RF)(Pty)Ltd being the secondary accountable institution , I/we have established and verified the identity of the client in accordance with Section 21 of the Financial Intelligence Centre Act, 2001("the Act"), and will keep records of such identification and verification according to the provisions of Section 22 of the Act;

3. warrant that I/we have explained all fees that relate to this investment to the investor and I/we understand and accept that the investor may withdraw his/her authority for payment to me/us in writing to the fund.

Signature of Financial Advisor

Date (ddmmyyyy)

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Print Initials and Surname

SECTION 10 MANAGER CONTACT DETAILS

Financial Advisor and Investor Support Centre

Telephone 0861 11 60 75
Fax 011 561 6812
Email admin@itransactfm.co.za

Head Office

Physical Address 15 Philips Street Ferndale Randburg South Africa 2194
Postal Address PO Box 4769 Randburg South Africa 2125
Website www.itransactfm.co.za

Trustee Company

RMB Custody and Trustee Services is a company registered in South Africa (with company registration number: 1929/001225/06), and is approved as a trustee company by the Financial Sector Conduct Authority to hold assets in trust on behalf of the Investor.