



ITRANSACT RETIREMENT FUNDS TWO-COMPONENT INTRA FUND TRANSFER FORM

Select the applicable product:

Itransact Retirement Plan

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Itransact Preservation Plan

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This form is applicable to members of the Prime Preservation Pension Fund (12/8/37924); Prime Preservation Provident Fund (12/8/37926) and Prime Retirement Annuity (12/8/37925). The purpose of this form is for you to instruct the Fund and its Administrator to process an "intra-fund transfer". This instruction is important. If you do not understand the consequences of this instruction, please contact your financial adviser for assistance.

1. YOUR PERSONAL INFORMATION AND CONTACT DETAILS

Fund Membership No.

Title

Dr

☐

Mr

☐

Mrs

☐

Ms

☐

Prof

☐

Surname

First Names

Date of Birth

Identity No.

Maiden Name

Income Tax Reference No.

Residential Address

Postal Address

Home Tel No.

Work Tel

Tel (Mobile):

Email

2. INTRA-FUND TRANSFER

Please take careful note that should you want to transfer the value of your Vested Component and/or value of your Savings Component to your Retirement Component, this will be regarded as an "intra-fund transfer". An "intra-fund transfer" involves moving savings within your retirement/preservation plan between two components within the same retirement/preservation fund. "Intra-fund transfers" are intended to move funds from the flexible component to a more secure component, where the money is preserved for retirement purposes.

3. INSTRUCTION

Please select the relevant section and tick (✓) where appropriate.

Vested Component to Retirement Component

☐

Savings Component to Retirement Component

☐

4. IMPORTANT INFORMATION

1. As per the legislative requirements, no “intra-fund transfers” are permitted from the Retirement Component to the Savings Component and/or Vested Component.
2. Once the value of your Vested Component and/or value of your Savings Component is transferred to your Retirement Component, you will not be able to access these funds prior to retirement. The Retirement Component has stricter rules about when and how funds can be accessed, which are often limited to retirement, disability, or death.
3. After the “intra-fund” transfer is processed, the balance in your Savings Component will be adjusted accordingly. The Savings Component will still receive one third of your retirement contributions and you will still have access to the remaining funds, subject to the legislative requirements and rules of the Fund governing the Savings Component.
4. An “intra-fund transfer” does not constitute a transfer in terms of section 14 of the Pension Funds Act 24 of 1965.
5. There are no tax implications associated with “intra-fund transfers”.
6. There are no fees or charges that are applied to “intra-fund transfers”. may apply to the transfer, such as administrative fees, investment management fees.

5. MEMBER DECLARATION

I confirm that:

1. The information contained herein is correct, I have the necessary authority to submit this instruction and that this instruction is within my powers.
2. I have not received advice from the Administrator relating to this or any other instruction I would like processed.
3. I have read and understood the terms and business processes outlined within the Product Information Document.
4. I understand the “intra-fund transfer” options available to me and the implications on my access to my retirement savings and that I am making an informed choice in this regard.
5. “Intra-fund transfers” will be made in accordance with the Fund’s rules and within the parameters of the relevant and applicable legislation.
6. I acknowledge that only upon receipt of a fully completed “intra-fund transfer” form will my instruction be processed.
7. In the event of any loss suffered as a result of any details provided herein being incorrect, neither the Fund nor Administrator can be held liable for such losses.
8. I made the decision about the “intra-fund transfer” voluntarily.

Your Full Name

Your Signature

D	D	M	M	Y	Y	Y	Y
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SECTION 8: Financial Services Provider Declaration and Signature

I/We understand/warrant/confirm that:

1. The latest terms and conditions associated with this product are applicable. The Financial Service Provider is responsible for ensuring that he/she/it has read and understood them and explained them to the Member in full. A copy of these terms and conditions may be requested from the Administrator.
2. The Financial Service Provider confirms that all statements made and information provided on this form are correct.

Signed at Place

Advisor’s Signature

D	D	M	M	Y	Y	Y	Y
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