

ITRANSACT LIVING ANNUITY FUND WITHDRAWAL FORM

(To be completed by Investors who qualify to withdraw from the Itransact Living Annuity Fund)

IMPORTANT INFORMATION

1. Please send this form and all associated documents directly to the Administrator (by email only) to the following email address: **instructions@itransact.co.za**
2. Automated Outsourcing Services (Pty) Ltd, trading as Itransact is an authorised Financial Services Provider (FSP 650) and is the Administrator of this product.
3. The responsibility of transmitting the documents to the Administrator lies with the sender.
4. No form will be considered complete without all the required fields being completed and the required supporting documentation being submitted. The Administrator reserves the right to reject any application and or instruction at any time due to incomplete or insufficient documentation and information.
5. **It is important that you have read and understood all the latest product media, terms and conditions associated to this product before you sign this form, all of which are available from the Administrator whose details are provided at the end of this form.**
6. **Note that you may only withdraw from the Fund if;**
 - The total investment value of all your Itransact Living Annuity Fund investment accounts is less than or equal to R125 000 and you are not contributing to the fund anymore, and/or
 - If you have emigrated from South Africa and your emigration has been approved and recognised by the South African Revenue Services and the South African Reserve Bank.
7. **If your withdrawal is due to emigration, the Administrator requires the following documents:**
 - Copy of South African Reserve Bank (SARB) clearance form
 - Copy of South African Revenue Services (SARS) clearance form
 - Copy of clearance letter from your bank
8. **Cash lump sum payments and tax information**
 - The cash lump sum is subject to a tax directive issued by SARS. Itransact is required to deduct tax before making payment.
 - Once we have applied for a tax directive, it cannot be cancelled.
 - Please note that Itransact cannot confirm or guarantee what information will be taken into account or accepted by SARS.

SECTION 1: INVESTOR DETAILS

Investor Number

Title Surname

First Names

South African Identity Number Male Female

Income Tax Number

Estimated taxable income for the current tax year R .

SECTION 3: WITHDRAWAL OPTIONS

Emigration or full withdrawal below R125 000

SECTION 4: BANK ACCOUNT DETAILS

If this bank account differs from the current bank account on record, the bank account holder (the investor, or the investors legal guardian/s or persons with a power of attorney to act on behalf of the investor) is required to provide the Administrator with proof of bank account details with this application in the form of a copy of a current bank statement, not older than 3 months, which reflects the bank name, the account holder’s full name and the bank account number. Please note that no credit card or Internet statements will be accepted.

Name of Bank Account Holder

Name of Bank

Branch Name

Bank Account Number Branch Code

Account Type

All payments are made electronically to your current, transmission or savings bank account only. No payments will be made to credit cards or market linked accounts.

SECTION 5: INVESTOR DECLARATION

1. The latest terms and conditions associated to this product are applicable. The investor is responsible for ensuring that the terms and conditions have been read and fully understood. A copy of these terms and conditions may be requested from Itransact and/or its website.
2. The investor confirms that all statements made, and information provided on this form are correct.

Signature of Investor (or person acting on behalf of the Investor) Date (ddmmyyyy)

Print Initials and Surname

SECTION 6: FINANCIAL SERVICES PROVIDER DECLARATION (IF APPLICABLE)

1. The latest terms and conditions associated to this product are applicable. The financial advisor is responsible for ensuring that the terms and conditions have been read and fully understood. A copy of these terms and conditions may be requested from Itransact and/or its website.
2. The financial advisor confirms that all statements made, and information provided on this form are correct.

Signature of Authorised Financial Service Provider/Representative Date (ddmmyyyy)

Print Initials and Surname

SECTION 7: IMPORTANT CONTACT INFORMATION

Financial Advisor Support Centre

Telephone 086 143 2383 | Email info@itransact.co.za

Investor Support Centre

Telephone 086 146 8383 | Email investor@itransact.co.za

www.itransact.co.za