



# **STRUCTURED NOTE**

## **NEW BUSINESS APPLICATION FORM FOR LEGAL ENTITIES**

# **VERSION NUMBER 1.0**

## **INVESTMENT PROCESS**

STEP 1 Complete the form and agree to the terms and conditions	<ul> <li>To ensure there is no delay in processing your investment, please complete the form accurately and ensure you understand the terms and conditions you are entering into.</li> <li>Depending on the investment type and/or product you may be required to complete and provide additional forms.</li> </ul>
STEP 2 Send documents to Itransact via Email	Email your documents to: newbus@itransact.co.za  If you experience difficulties transmitting your documents to us, please call us on 0861 468 383 during business hours and we will gladly assist you.
www.itransact.co.za	Document Checklist for all persons acting on behalf of the legal entity  Annexure A  Copy of your bar coded South African ID, valid passport (if a foreign national)  All FICA Documents as per the FICA Checklist, that is available on the Itransact website.
STEP 3 Fulfilment	<ul> <li>We will acknowledge receipt of your documents and contact you if there are any outstanding requirements.</li> <li>Transactions will only be acted upon after confirmed receipt by the Administrator of a completed and signed investor mandate, investor FICA verification, relevant supporting documentation, and investment funds which have been cleared and made available for investment in the Administrators bank account.</li> <li>You will receive confirmation once your instruction has been processed.</li> <li>You will receive an email welcoming you to Itransact.</li> <li>You will automatically be provided with a secure Itransact online servicing account. New investors are requested to activate their online account by registering on our website within 3 business days. Subsequent products will automatically appear in your online account.</li> </ul>
CUT OFF TIMES	<ul> <li>Instructions received before 11h00 on a business day will start processing on that day.</li> <li>Instructions received after 11h00 on a business day will start processing on the next business day.</li> <li>Instructions received on a weekend or public holiday will start processing on the next business day.</li> </ul>



# SECTION 1: INVESTOR DETAILS

Investor Type	SA Company		Foreign Company CC Trust Partnersh										nersh	nip [				
	Other																	
Nature of Business																		
Trading Name	[																	
Registered Name																		
Company/Trust Registration Number																		
Income Tax Number (if applicable)	[																	
VAT Registration Number (if applicable	)																	
Trading Address																		
																· 		
													Сс	ode				
Tick if postal address is same as trading							ı							'				
Postal Address	[																$\neg$	
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Cell Phone Number	L																$\frac{1}{1}$	
Other Contact Number	L			<u> </u>				<u> </u>								I	$\dashv$	_
	L																<u></u>	
Email Address	L																	
	L																	
Politically Exposed Persons																		
Indicate if any authorised representative legal entity is a foreign prominent public	re/s, ultimate ber c official or a dom	nefic estic	ial c pr	owne	er/s ent i	or a influ	ny s entia	hare al pei	hold rson	er/s	of t	he	Υ	′es [		1	No [	
If yes, please specify:																		
																	$\Box$	



# **SECTION 2:** 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-U.S 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)

# **Organisation Tax Residency Classification** If your organisation is a Financial Institution, please specify: South African Financial Institution or a Partner Jurisdiction Financial Institution Participating Foreign Financial Institution (in non-intergovernmental agreement jurisdiction) Non-Participating Foreign Financial Institution (non-intergovernmental agreement jurisdiction) Financial Institution resident in the USA or in a US Territory Exempt beneficial Owner (this includes a South African registered retirement scheme, etc) Deemed Compliant Financial Institution (this includes Non-Profit organisations) If your organisation is not a Financial Institution, please specify: Active Non-Financial Entity Passive Non-Financial Entity If your organisation is a US tax resident and not a Specified US person, please specify: A regularly traded corporation on a recognised stock exchange Any corporation that is a member of the same expanded affiliated group as a regularly traded corporation on a recognised stock exchange A government entity Any bank as defined in section 581 of the US Internal Revenue Code A retirement plan under section 7701(a)(37), or exempt organisation under sec 501(a) of the IRS Code or any other exclusion. Organisation's Classification under Common Reporting Standards (CRS) Select an option with reference to primary country of residence: Financial Institution under CRS (includes pension fund schemes, government entity etc) An investment entity located in a Nonparticipating Jurisdiction and managed by another Financial Institution Active Non-Financial Entity which frequently trades on an established securities market or associated with and established securities marker or a corporation which is a related entity of such a corporation. Active Non-Financial Entity-a Government Entity, a Central Bank or an International Organisation. Active Non-Financial Entity, other than those listed above Passive Non-Financial Entity. **Dividend Withholding Tax** If your organisation is exempt from DWT, please select the appropriate box to declare the reason for the exemption: A company or close corporation registered in South Africa for tax purposes A non-profit organisation (approved by SARS in terms of section 30(3) of the Income Tax Act)

A pension fund, pension preservation fund, provident fund, provident preservation fund, retirement annuity fund, beneficiary fund or benefit fund registered in terms of the Pension Fund Act 1956.



A person contemplated in section 10	I)(t) of the Income Tax Act
A trust contemplated in section 37A	of the Income Tax Act (e.g. mining rehabilitation trust)
Fidelity and Indemnity funds contem	plated in section 10(1)(d)(iii) of the Income Tax Act A
small business funding as contempla	ed in section 10(1)(c) of the Income Tax Act
Entity is not exempt from DWT	
SECTION 3: METHOD O	F COMMUNICATION & PRIVACY OF PERSONAL INFORMATION
Communication	
Please note that email will be us	ed as the default method of communication by the administrator. All communication with the ust also be via electronic means, which includes email and telephonic communications using ne last section of this form.
of 2013 ('POPIA'), and consent to addition, you expressly consent biometric data) for security pur your personal information to to the Where information is transmitted in place to ensure the protection information to third-party service beneficiaries, and dependants in	requires your personal information, as defined in the Protection of Personal Information Act of Itransact processing such information to open and administer your investment accounts. In that Itransact may verify and process your personal information (including your voice and or poses and so as to comply with its obligations in terms of legislation. Itransact may transmit hird-party service providers for the purposes of storing and maintaining that information. It do offshore providers, Itransact has confirmed that sufficient legislation and agreements are not that information. Where directed by your financial adviser, Itransact will transmit your the providers appointed by your adviser. We will only use personal information about you, your not line with the Itransact Privacy Policy. Please refer to the Privacy Policy on the website for ad obligation in relation to your personal information.
Marketing Do you consent to receive occa	sional marketing information relating to your investment from the administrator?
Yes No No	
SECTION 4: INVESTME	NT DETAILS
	der/Advisor (where applicable) E FAIS license(s) below which are required to market certain structured notes and products.
Category 1.8 - Shares	
Category 1.24 - Structured Depo	its
Category 1.25 - Securities & Instr	iments
Source of Funds	Company Profit Capital Donation Saving Investment
	Inheritance Other (Please Specify below)



Name of Bank

<b>Minimum Investment Amount</b> The minimum investment amount may differ from product investment amounts before signing this application form.	to pro	duct	t. Ref	er to	the a	appli	icable	e pro	duct	mar	ketir	ng ma	ateria	al mir	nimu	m	
Which currency are you investing in? (Choose one only)																	
ZAR USD GBP EURO CHF																	
PRODUCT NAME					LUM	P SI	UM A	МО	UNT	*							
															•		
* Please ensure you understand the fee structure explain	ned in	"Fe	es &	Cha	rges'	' fur	ther	belo	W.								
Method of Payment (Note that Itransact does not acc	ept ch	iequ	ies)														
Lump-sum Investment (Please take note of the r	estrict	ions	s reg	ardi	ng th	ne Iti	ransa	act b	ank	acco	ount	deta	ails b	elow	/)		
ITRANSACT BANK ACCOUNT DETAILS																	
For security reasons and to comply with the Financial Intelligence Crime Act (FICA) the Administrator must perform certain security checks with you as the investor before it may provide you with the bank details and investor reference to be used by you when making a lump sum investment.  Once you have received the bank account details and reference number from the Administrator, and have made a																	
Once you have received the bank account details as payment, you are required to provide the Administ payment confirmation) by submitting it via email to No transaction will be finalised without receiving the	rator v	with ema	the	pro dres	of of s sta	pay	/mer	ıt (c	ору	of d	epo	sit sl	ip oı	onli	ine	orm.	
SECTION E. INVESTOR BANK RETAILS																	
SECTION 5: INVESTOR BANK DETAILS SOUTH AFRICAN BANK ACCOUNT																	
(This bank account must be in the name of the investor and	not old	der t	han 3	moi	nths.												
												1	ı			1	
Name of Account Holder	Ш																
Name of Bank																	
Account Number																	
Branch Name																	
Branch Code																	
Account Type																	
FOREIGN BANK ACCOUNT																	
(This bank account must be in the name of the investor or th	e inves	stor's	s lega	l gua	ardiar	n in t	he ca	se of	a m	inor.)	)						
Beneficiary Bank Account Details																	
Name of Account Holder																	
												L	L				



Full Address of Bank																	
						I		l	I		I		I				
								<u> </u>									
Account Number																	
IBAN																	
BIC/SWIFT																	
Currency of Account																	
Correspondent Bank Account Details																	
•			1											1			
Name of Bank																	
Full Address of Bank																	
										<u> </u>							
DIC/SWIFT			<u> </u>		 	 		 	 	 	 			 			
BIC/SWIFT																	
SECTION 6: INVESTOR DECLARATION																	
General																	
The Investor, or where applicable, the Investor's authori warrants, acknowledges, understands, confirms and co				by a	appe	ndin	g the	eir si	gnat	ure l	here	to, fı	urthe	er sta	ites,	decl	ares,
(Select one option only)																	
A Financial Services Provider has been appointed	ed to	assis	t wit	h th	is inv	/estr	nent	ona	a nor	n-dis	cret	iona	ry ba	sis.			
No Financial Services Provider has been appoint long as no such appointment is made.	ted ar	nd th	nat a	ll ref	eren	ces i	made	e to	such	sha	ll not	t be	appl	icabl	e for	as	
A Financial Services Provider has been appointed proof of authority must be provided by the inve							nent	on a	a dis	creti	onar	y ba	sis (i	in wł	nich (	case	



#### And that:

- 1. The latest terms and conditions and the relevant investment media including the features of the Plan including, but not limited to, its underlying investments, fees, costs, disclosures and risks associated to investing in the Plan have been read and fully understood, and that the aforesaid information has been obtained by the Investor itself, and that it is the Investors responsibility to act upon this information, whether a Financial Service Provider has been appointed or not.
- 2. All statements provided by the Investor in this form are true and correct in every respect and that such statements, together with the Administrators investment confirmation, shall form the basis of the contract, which is to be entered into with the Administrator in terms of the Financial Advisory and Intermediaries Services Act (FAIS).
- 3. Where a Financial Services Provider has been appointed, that neither the Financial Services Provider nor any representative of the Financial Services Provider is an employee or agent of the Administrator and that the appointed Financial Services Provider acts as the Investor's agent and that neither the Administrator nor any other party appointed from time to time to administer the Plan can be held liable for any act or omission of the Financial Services Provider and/or any representative of the Financial Services Provider.
- 4. If the appointed Financial Services Provider and/or its representative's services are terminated, that it is the Investors responsibility to immediately inform the Administrator in writing of such termination where after the Administrator will cease payment of all fees, other than accrued fees, to the Financial Services Provider.
- 5. All instructions to the Administrator must be signed by the Investor or the Investor's duly authorised signatory (or guardian in the case of a minor) and may not be signed by the Financial Services Provider on behalf of the Investor, except where the Financial Services Provider is appointed on a discretionary basis and proof of authority has been provided by the Investor the Administrator.
- 6. It is the Investor's responsibility to ensure the receipt of any instruction and/or document by the Administrator.
- 7. There are certain requirements in terms of the Financial Intelligence Centre Act (FICA) which need to be complied with before this investment may be processed and that these requirements have been understood by the Investor and where applicable explained to the Investor by the Financial Services Provider.
- 8. The Investor is not a United States Person or a resident/national in any of the UN Sanctioned countries jurisdictions or is an entity or a member of an entity, that is owned or controlled by any person or entity that is resident, located, incorporated or registered in the United States or any UN Sanctioned country nor a US person as defined in the Foreign Account Tax Compliance Act of the USA. In terms of the Financial Intelligence Centre Act, 2001, the Insurer or the FSP/Representative will require a certified copy of the Investor's identity document/passport, appropriate proof of the Investor's current residential address, together with certain personal and financial information. The information required will vary depending on the nature of the investor. The investor further acknowledges that, the Administrator will not be permitted to remit the proceeds of any sale or distribution until acceptable identification is provided. The investor also acknowledges that the money which he is investing is not derived from the "proceeds of unlawful activities", as defined in the Prevention of Organised Crime Act (POCA)
- 9. To receiving reports from the Administrator on a regular basis.
- 10. Online services are provided to Investors on a continual basis where Investors apply for such services from the Administrator.
- 11. Where the value of the investments held under the Plan at any time is less than R1000, that the Administrator reserves the right to cancel the Plan without informing the Investor and/or where applicable, the appointed Financial Services Provider, and refund the amount to the Investors bank account recorded on this form.
- 12. Where the Investor has appointed a Financial Services Provider, the Investor agrees that the Financial Service Provider is able to access the Investors information continuously via electronic means made available by the Administrator.

#### Fees and Charges

Please take special care in understanding how the financial advice and a administrative fees differ from each other, how they are applied and subsequently deducted from this investment.

#### Initial advice fee

Financial advice fees may or may not be integrated into the structure of the underlying investment instrument. Please read the product marketing material carefully and confirm the fees with the financial services provider you have appointed in this application form.

#### Administration fee

Administration fees may or may not be integrated into the structure of the underlying investment instrument. Please read the product marketing material carefully and confirm the fees with the financial services provider you have appointed in this application form.

#### Investment Management Fee

Where applicable. Please read the product marketing material carefully and confirm the fees with the financial services provider you have appointed in this application form.



Initia	Initial Advice Fee (paid once only and upfront to the Financial Services Advisor, inclusive of VAT)															•		%
Adm	inistration Fee (paid once only and upfront to the	e Adm	nini	strato	r, ind	clusiv	/e of	VA <sup>-</sup>	T)							•		<b>%</b>
	stment Management Fee (only where applicable) ice Provider , inclusive of VAT	. Paid	on	nce on	ly an	ıd up	fron	it to	the I	inar	ncial					•		%
тот	AL FEES (inclusive of VAT)															•		%
Add	ditional fees and charges:																	
I/we	acknowledge that if I/we elect to:																	
a) b)	redeem my/our investment in the Product earli cede my/our rights in respect of the investmen							_		e of t	he I	Prod	uct;	or				
I acc	we will not receive the full amount back that I/we initially invested (in any event and depending on the nature of the Production accept that I might not get my full investment back) and in addition I/we may be liable to pay the Administrator the following dditional charges and/or fees*:  An early redemption fee of 1.00% (One Percent incl VAT) may apply																	
•	An early redemption fee of 1.00% (One Pero A cession fee of R570.00 (Five Hundred &				_		-	ay ap	oply									
By si prode availa	ptance of product terms and conditions gning this application form, you acknowledge th uct and the implications thereof. The terms and able from (1) your financial advisor (2) from w.itransact.co.za)or (3) by contacting the Administ	d cond	diti F	ions a orms	ire d and	ispla Do	yed wnl	sep bads	arate see	ely f	rom on	this the	app Ac	olicat dmin	ion istra	forn tor's	n and s we	d are bsite
							ate (	(ddm	nmyy	<sub>'VV</sub> )								
Signa	ture of authorised representative of the legal entity								, ,	3 37 L								
Print	Initials and Surname																	
			1								ı				<u> </u>			
- Cien-	ture of authorized representative of a level outity						ate (	(ddm	nmyy	уу)								
	ture of authorised representative of a legal entity																	
Print	Initials and Surname																	



# SECTION 7: FINANCIAL SERVICES PROVIDER DECLARATION (IF APPLICABLE)

#### General

- The Financial Services Provider ("FSP") through whom the application for an investment is being made confirms that the FSP and the Financial Advisor named in section 10 are licensed (in the case of the FSP) and authorised (in the case of the Financial Advisor) to provide the relevant financial services in respect of the financial products to which this application relates. (A certified copy of the FSP licence in terms of the Financial Advisory and Intermediary Services Act, 2002, ("FAIS") must be supplied). The FSP specifically confirms that the FSP and the Financial Advisor are "fit and proper", as required by FAIS, to provide the relevant financial services in respect of the financial products to which the application relates.
- The Financial Services Provider ("FSP") through whom the application for an investment is being made confirms that the FSP and the Financial Advisor named in section 10 are licensed (in the case of the FSP) and authorised (in the case of the Financial Advisor) to provide the relevant financial services in respect of the financial products to which this application relates. A certified copy of the FSP licence in terms of the Financial Advisory and Intermediary Services Act, 2002, ("FAIS") must be supplied.
- The FSP specifically confirms that the FSP and the Financial Advisor are "fit and proper", as required by FAIS, to provide the relevant financial services in respect of the financial products to which the application relates.
- The FSP/authorised representative of the FSP by appending his/her signature hereto, states and declares the FSP/authorised representative of the FSP has read and understood the terms and conditions pertaining to this investment product and that the FSP shall be bound by these terms and conditions insofar as such terms and conditions affect the FSP. The FSP warrants that all statements given by him/her/it in the application form are true and correct in every respect.
- The FSP/Financial Advisor shall not negotiate fees in respect of the itransact Securities Investment Plan which are higher than the maximums stipulated in section 8.
- The FSP further warrants and confirms that he/she/it has explained all the features of the itransact Securities Investment Plan and its underlying investments to the Investor, including, but not limited to all the fees, costs and risks involved and has made all disclosures required in terms of FAIS to the Investor.
- 7 The FSP declares and confirms that:

FSP house code with Itransact

PRI Code (For ABSA advisors Only)

- The FSP is the primary accountable institution in terms of the regulations to the Financial Intelligence Centre Act, 2001 ("FICA"), in respect of the Investor;
- The FSP has established and verified the identity of the Investor, as required in terms of section 21 of FICA;
- The FSP will keep records of information relating to the Investor as is required in terms of section 22 of FICA;
- The FSP will provide Automated Outsourcing Services (Pty) Ltd with any information and documentation requested by it in relation to the Investor, immediately on request.

# Please Select Applicable Option: The FSP is appointed: On a non-discretionary basis, in which case proof of authority must be provided Date (ddmmyyyy) Signature of Authorised Financial Service Provider/Representative Print Initials and Surname SECTION 8: FINANCIAL SERVICES PROVIDER DETAILS (IF APPLICABLE) Financial Service Provider Details Name of Financial Services Provider (The Company)



Telephone																	
Facsimile																	
Email																	
Tick the box if the details below are the same as the FSP deta	e FSP details above																
Name of Financial Advisor/Representative																	
Advisor/Representative code with Itransact																	
Telephone																	
Cell																	
Facsimile																	
Email																	

# **SECTION 9: IMPORTANT CONTACT DETAILS**

# **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

## **ANNEXURE A**



# **ACTING ON BEHALF OF AN INVESTOR**

This form must be completed by each authorised signatory, each person acting on behalf of the investor and all controlling persons.

Each authorised representative of the legal entity must complete this form. In the event that more than one person is authorised to act on behalf of the investor, copies must be made of this section.

#### IMPORTANT INFORMATION

This document must be sent together with the product application form to the Administrator by email at <a href="mailto:newbus@itransact.co.za">newbus@itransact.co.za</a>

SECTION 1: DETAILS OF THE PERSO	ON ACTING ON BEHALF OF THE INVESTOR
Title	Mr Ms Mrs Dr Prof The Hon
Name	
Surname	
Date of Birth (ddmmyyy)	
Identity/Passport Number	
Nationality	
Income Tax Number	
Residential Address	
	Code
Postal Address	
	Code
Cell Phone Number	
Other Contact Number	
Email Address	

Are you registered tax pany in any country other than South	Υ	es		Ν	0												
If yes, please specify:							_										
Country of Tax Residence	Tax	Ider	ntific	atior	n Nu	mbe	r										
			•							•							
DECLARATION																	
I confirm that all information provided herein it true and cor	I confirm that all information provided herein it true and correct and that I have read and understood the contents of this form.																
I agree to notify the administrator immediately if informatio	n on t	his ch	nang	e.													
			_		Da	ate (d	ddmr	nyyy	/y)								
Signature																	
Print Initials and Surname																	
													—				