



## ITRANSACT SECURITIES INVESTMENT PLAN PORTFOLIOS

### NEW BUSINESS APPLICATION FORM

#### VERSION NUMBER 9.0

#### IMPORTANT INFORMATION YOU NEED TO KNOW BEFORE YOU INVEST

##### Financial Advice

Research has proven that receiving good independent financial advice can make a substantial difference to an investment outcome. If you are not comfortable making your own investment decisions, consider using the services of an independent financial adviser (IFA). To locate an IFA in your area, refer to the 'Find an adviser' section of our website. Itransact is a licensed financial services provider for the purposes of distributing and administering this investment product. Itransact does not provide financial advice.

##### Product Information

Please ensure that you choose the right product before you invest. Refer to our product fact sheets, brochures, fee disclosures and research made available on our website.

#### INVESTMENT PROCESS

<b>STEP 1</b> Complete the form and agree to the terms and conditions	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. Depending on the investment type and/or product you may be required to complete and provide additional forms.
<b>STEP 2</b> Send documents to Itransact via Email  Additional forms and FICA requirements for juristic investors (i.e. companies and trusts) are available on our website in the 'Forms & Downloads' section.  <b>www.itransact.co.za</b>	Email your documents to: <b>newbus@itransact.co.za</b>  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.  <b>Document Checklist</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Completed application form</li> <li><input type="checkbox"/> Copy of your bar coded South African ID, valid passport (if a foreign national) or birth certificate (if a minor)</li> <li><input type="checkbox"/> Proof of your residential address less than three months old</li> <li><input type="checkbox"/> Proof of your bank details (e.g. cancelled cheque or bank statement)</li> <li><input type="checkbox"/> Additional forms that may be requested from you in this application form</li> </ul>
<b>STEP 3</b> Fulfilment	<ul style="list-style-type: none"> <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>
<b>CUT OFF TIMES</b>	<ul style="list-style-type: none"> <li>• Instructions received <b>before</b> 11h00 on a business day will start processing on that day.</li> <li>• Instructions received <b>after</b> 11h00 on a business day will start processing on the next business day.</li> <li>• Instructions received <b>on</b> a weekend or public holiday will start processing on the next business day.</li> </ul>

**SECTION 1: INVESTOR DETAILS**

Investor Type      Individual     Company     CC     Trust     Partnership

Other

Title      Mr     Ms     Mrs     Dr     Prof     The Hon

First Name or Trading Name (If a legal entity)

Surname/Registered Name

Company/Trust Registration Number

Identity/Passport Number

Resident of South Africa      Yes       No

Date of Birth (ddmmyyy)

Gender      Male       Female

Income Tax Number (if applicable)

Withholdings Tax Status      Exempt       Not Exempt (Refer to the latest Terms and Conditions relating to this product)

Occupation

VAT Registration Number (if applicable)

Residential/Trading Address

Code

Tick if postal address is same as residential

Postal Address

Code

Cell Phone Number

Other contact Number

Email Address

**SECTION 2: THIRD PARTY APPLICANT/AUTHORISED REPRESENTATIVE OF A LEGAL BODY**

(If you are opening an account for a person other than yourself, the name of this person, in whose name the investment is made is filled in under Section 1. The details of the authorised representative who is responsible for the investment must be filled in under Section2.)

First Name	<input type="text"/>
	<input type="text"/>
Surname	<input type="text"/>
	<input type="text"/>
Identity/Passport Number	<input type="text"/>
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Relationship	<input type="text"/>
Cell Phone Number	<input type="text"/>
Other contact Number	<input type="text"/>
Email Address	<input type="text"/>
	<input type="text"/>

**SECTION 3: PARENT/LEGAL GUARDIAN**

(Where an investment is made on behalf of a minor, the particulars of the parent or legal guardians must be furnished here.)

First Name	<input type="text"/>
	<input type="text"/>
Surname	<input type="text"/>
	<input type="text"/>
Identity/Passport Number	<input type="text"/>
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Relationship	<input type="text"/>
Cell Phone Number	<input type="text"/>
Other contact Number	<input type="text"/>
Email Address	<input type="text"/>
	<input type="text"/>

**SECTION 4: 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)

**For Natural Persons**

Are you a tax resident of another country other than South Africa? Yes  No

Is your Country of birth or Nationality not South Africa? Yes  No

**For Juristic Persons**

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 Foreign Account Tax Compliance Act - Self-certification Form available from the Administrator and/or its website or from your financial advisor.**

**SECTION 5: METHOD OF COMMUNICATION & PRIVACY OF PERSONAL INFORMATION**

(Please note that email will be used as the default method of communication by the Administrator. All communication with the Administrator by the Investor must also be via electronic means, which includes email, fax and telephonic communications using the contact details provided in the last section of this form)

**Privacy Of Personal Information**

- We will not collect, collate, process or disclose your personal information without your express written consent, unless legally required to do so or it is for the maintenance of your investment.
- We will only electronically request, collect, collate process or store your personal information if it is lawful for us to do so.
- Should your personal information be required, we will disclose to you in writing the specific purpose for which it is needed. Furthermore, we will not disclose your personal information for any purpose other than the one disclosed to you, nor will it disclose any of your personal information to a third party without your express written consent, unless it is required of us by law or it is for the maintenance of the investment.
- We will keep a record of your personal information and the purpose for which it was used.
- We will take all reasonable steps to ensure that your personal information remains confidential and secure by storing it on our secure database.
- We keep all financial and investment information that it records strictly confidential and will not disclose it to any third party that has no right or title to the information.
- We will endeavour to take all reasonable and necessary precautions to secure access to your transactions.

Do you agree to receive occasional marketing information relating to your investment from the administrator? Yes  No

**SECTION 6: GENERAL INVESTMENT DETAILS**

Source of Funds

Salary  Policy  Donation  Saving  Investment

Inheritance  Other  (Please Specify below)

**Minimum Recurring Premium R300.00** per Portfolio

**Minimum Lump Sum Investment R5 000.00** per Portfolio

**SECTION 7: INVESTMENT DETAILS**

Note to Financial Services Provider/Advisor: Please take note of the applicable FAIS license(s) required to market Segregated Portfolios comprising of Exchange Traded Funds.

**Category 1 (1.14) Collective Investment Schemes (CIS)**

A Category 1 licence which covers the giving of advice and the rendering of intermediary services in respect of participatory interests in collective investment schemes, is required.

SEGREGATED PORTFOLIO NAME	DEBIT ORDER AMOUNT	LUMP SUM AMOUNT
<input type="text"/>	R <input type="text"/>	R <input type="text"/>
<input type="text"/>	R <input type="text"/>	R <input type="text"/>
<input type="text"/>	R <input type="text"/>	R <input type="text"/>
<input type="text"/>	R <input type="text"/>	R <input type="text"/>

**Method of Payment** (Note that Itransact does not accept cheques)

**Monthly Debit Order**

Debit Order Deduction Date      3<sup>rd</sup> of the Month       15<sup>th</sup> of the Month       25<sup>th</sup> of the Month

Debit Order Deduction Intervals      Monthly       Quarterly

Debit Order Deduction Annual Increase       0%       5%       10%       15%       20%

(Note that annual increases are limited to whole percentage increments only. No fractionalised percentage increments or monetary amounts will be accepted)

**Once Off Electronic Collection by the Administrator (Lump Sums Only)**

Please choose the date that the Administrator should collect your once off lump sum amount.

3<sup>rd</sup> of the Month       15<sup>th</sup> of the Month       25<sup>th</sup> of the Month

Once off lump sum collection instructions must be received by the Administrator at least 3 Business Days prior to the chosen collection date. Instructions received after that period will be processed on the next sequential collection date. Note that each lump sum collection is limited to increments of R500 000 per collection.

**Lump-sum Investment (Please take note of the restrictions regarding the Itransact bank account details below)**

**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 payment, you are required to provide the Administrator with the proof of payment (copy of deposit slip or online payment confirmation) by submitting it via email to the email address stated on the first page of this application form. No transaction will be finalised without receiving the proof of deposit.**

Electronic fund transfers are recommended. If you make a deposit by cheque it may undergo a clearing period of between 10 and 15 business days with your bank before the funds are made available for investment.

**SECTION 8 : INVESTOR BANK DETAILS**

If bank details are different from those which the administrator has on record for the investor, please include proof of bank account details with this form in the form of a copy of a cancelled cheque or 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 Account Holder	<input type="text"/>
	<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 Bank Details**

(This section should only be completed if the debit order bank account details differ from the investor bank details stated above. This account must be a South African bank account.)

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

Name of Account Holder	<input type="text"/>
	<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 Automated Outsourcing Services (Pty) Ltd, its successors or its assignees ("the Administrator") 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 Administrator not less than 10 business days written notice.
- 5 I/We agree that receipt of this instruction by the Administrator shall be regarded as receipt thereof by my/our bank.
- 6 I/We acknowledge that in order to activate the debit order, the Administrator must receive the debit order authority at least 10 business days prior to the first debit order date.

**Please note that the debit order instruction will be accepted upon the signing of this authority by the bank account holder.**

\_\_\_\_\_ Date (ddmmyyyy)

**Signature of Bank Account Holder**

Print Initials and Surname	<input type="text"/>
	<input type="text"/>

## SECTION 9: INVESTOR DECLARATION

### General

The Investor, or where applicable, the Investor's authorised signatory, by appending their signature hereto, further states, declares, warrants, acknowledges, understands, confirms and consents that;

#### (Select one option only)

- A Financial Services Provider has been appointed to assist with this investment on a non-discretionary basis.
- A Financial Services Provider has been appointed to assist with this investment on a discretionary basis (in which case proof of authority must be provided by the investor to the Administrator)
- No Financial Services Provider has been appointed and that all references made to such shall not be applicable for as long as no such appointment is made.

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.
13. An authorised Category II Investment Manager, Sunstrike Capital (Pty) Ltd, (trading as Index Solutions) and a subsidiary of the Administrator, shall manage the securities held in the selected Portfolio under the terms and conditions of the Investment Manager. The investor appoints the Investment Manager when agreeing to and signing this investment application form, thereby providing the Investment Manager with full discretion to buy and sell securities within the selected Portfolio. If the Investor wishes to choose other securities, then this product is not suitable for the Investor.

**Fees and Charges**

**The Investor acknowledges, confirms, consents to, and instructs the Administrator to pay the following fees and charges;**

1. Initial advice fee (Levied against all investment contributions)
  - Lump sum □ . □□ %  
(Maximum of 3%)
  - Debit order □ . □□ %  
(Maximum of 3%)
2. Ongoing annual financial advice fee (Calculated as a percentage of the daily market value of the investment) □ . □□ %  
(Maximum of 1%)
3. An annual investment management fee of 0.15% (calculated as a percentage of the daily market value of the investment)
4. An annual administration fee (calculated as a percentage of the daily market value of the investment) according to the table below.

Market Value of Investments	Rate per Annum
On the first R500 000	0.39%
On the next R500 000	0.30%
On the amount over R1 000 001	0.20%

A trading fee of 0.08% shall be charged on the value of all purchase and sale transactions. A nominal Investor Protection Levy and Central Securities Depository fee shall be charged for all securities purchase and sale transactions. Value added tax shall be charged on all fees and charges.

**PRODUCT TERMS AND CONDITIONS**

**Acceptance of product terms and conditions**

By signing this application form, you acknowledge that you fully understand the latest terms and conditions associated to this product and the implications thereof. The terms and conditions are displayed separately from this application form and are available from (1) your financial advisor (2) from the Forms and Downloads section on the Administrator’s website (www.itransact.co.za) or (3) by contacting the Administrator directly on the details available at the end of this application form.

\_\_\_\_\_ Date (ddmmyyyy)

**Signature of Investor or duly authorised person/s for minor investors**

Print Initials and Surname

\_\_\_\_\_ Date (ddmmyyyy)

**Signature of third party applicant or authorised representative of a legal body**

(if Section 2 or 3 of this application form is applicable)

Print Initials and Surname



**SECTION 10: FINANCIAL SERVICES PROVIDER DECLARATION**

**General**

**The Financial Services Provider (“FSP”) that has been appointed by the Investor and through whom the application for this investment is being made, by appending their signature hereto, states, declares, warrants, acknowledges, understands, confirms and consents that;**

1. The FSP and the Financial Advisor named in this application form is licensed (in the case of the FSP) and authorised (in the case of the Financial Advisor and/or Representative) to provide the relevant financial services in respect of the financial products to which this application relates.
2. The FSP and the Financial Advisor are “fit and proper”, as required by the Financial Advisory and Intermediary Services Act (FAIS), to provide the relevant financial services in respect of the financial products to which the application relates.
3. 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.
4. The FSP warrants that all statements given by the FSP in this application form are true and correct in every respect.
5. The FSP/Financial Advisor shall not negotiate fees in respect of the Plan which are higher than the maximums stipulated in this application.
6. The FSP has explained 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, to the Investor, in terms of FAIS.
7. 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.
8. The FSP has established and verified the identity of the Investor, as required in terms of section 21 of FICA.
9. The FSP will keep records of information relating to the Investor as is required in terms of section 22 of FICA.
10. The FSP will provide the Administrator with any information and documentation requested by it in relation to the Investor, immediately on request.
11. The FSP shall be provided with access to the Investor's information continuously via electronic means made available by the Administrator and warrants that the information may only and exclusively be disclosed to the Investor, or where applicable, the Investor's authorised signatory.
12. The FSP has fully explained the nature of the appointment of the Category II Asset Manager by the investor and the implications thereof.

\_\_\_\_\_  
**Signature of Authorised Financial Service Provider/Representative**

Date (ddmmyyyy)

Print Initials and Surname

<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"/>
<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"/>

**SECTION 11: FINANCIAL SERVICES PROVIDER DETAILS**

**Financial Service Provider Details**

Name of Financial Services Provider (The Company)

<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"/>
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Telephone

<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"/>
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Facsimile

<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"/>
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Email

<input type="text"/>
<input type="text"/>

Tick the box if the details below are the same as the FSP details above

Name of Financial Advisor/Representative

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Telephone

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Cell

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Facsimile

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## **SECTION 12: ADMINISTRATOR CONTACT DETAILS**

**Financial Advisor Support Centre**

Telephone 086 143 2383 | Fax 086 743 6959 | Email [info@itransact.co.za](mailto:info@itransact.co.za)

**Investor Support Centre**

Telephone 086 146 8383 | Fax 086 743 6959 | Email [investor@itransact.co.za](mailto:investor@itransact.co.za)

**[www.itransact.co.za](http://www.itransact.co.za)**