Financial planner form

NEDGROUP INVESTMENTS

1. What you need to know

1. Before completing this form please read the latest relevant Investment Agreement, Fund Fact Sheet and Portfolio Characteristics document - which can be obtained from our website: **www.nedgroupinvestments.com**, your financial planner or our Client Service Centre.
2. Your investment will be invested into the unit trust portfolio class specified on the relevant Portfolio Characteristics document.
3. The daily cut-off for receipt of instructions is 14:00; 12:00 for the Nedgroup Investments Money Market Fund.
4. We will process your instruction once:
   - we have received, reviewed and accepted your completed and signed form and support documentation;
   - we have performed all checks, verifications and assessments required in terms of FICA; and lastly
   - the money reflects in our bank account.
5. Information filled in outside of the relevant fields will not be considered when processing your instruction.
6. Return the completed and signed form with the relevant supporting documents to us via email to **nedgroupinvestments@silica.net** (please print and sign the form before scanning and emailing it to us, as an authorised signature is required for processing).
7. If you have any questions about this form please contact your financial planner or our Client Service Centre on **0860 123 263** (from within RSA) or on **+27 21 416 6011** (from outside RSA).

2. Investor details

Investor number ☐☐☐☐☐☐☐☐☐

Individuals:

Title and surname ☐☐☐☐ ______

First names ______

SA ID number ☐☐☐☐☐☐☐☐☐☐☐☐☐

Passport number (if foreign national) ☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiry date ☐☐☐☐☐☐☐☐ (D D M M Y Y Y Y) Country of issue ______

Legal entities:

Registered name ______

Registration number ☐☐☐☐ ☐☐☐☐☐☐ ☐☐

3. Preferred correspondence

We will send you, or the person acting on your behalf, all correspondence (e.g. statements, fund updates, ballot letters pertaining to your investment) via email. If you haven't provided an email address your quarterly statement will be sent via SMS.

You may choose who receives your quarterly investment statement:

☐ You / the person acting on your behalf ☐ Your financial planner ☐ Both

As an investor, you will also receive our quarterly Insights if you have provided us with an email address. If you do not wish to receive this please tick this box: ☐

4. Instruction details

Please indicate to which investment product this instruction applies

☐ Unit trust ☐ Tax-free investment ☐ Endowment

☐ Retirement Annuity Fund ☐ Preservation Fund ☐ Living Annuity

Please indicate what you would like to do:

☐ **I currently do not have a financial planner and I'd like to appoint one**

Please note

- To pay your financial planner you will need to switch your investment into a class that facilitates the payment of fees - please complete and submit a switch form per unit trust portfolio

☐ **I'd like to change my current financial planner**

Please note

- We require the relevant FICA documents as per the attached addendum unless your financial planner completes the declaration below confirming that they have obtained the necessary FICA documentation from you.
- If you are invested in a unit price class the annual financial planner fee specified in the portfolio characteristics document will be paid to the new financial planner.

Please confirm the fees to be paid to your new financial planner:

Account number	Unit trust portfolio	Initial debit order fee (excl VAT)	Annual financial planner fee (excl VAT)

☐ **I'd like to terminate my relationship with my current financial planner**

If you are a Nedbank employee or a direct family relation of a Nedbank employee and would like to be set up as a staff account, please complete the following:

Nedbank employee number

Please specify the investor's relationship to Nedbank employee

Please note

- We will switch your investments into our direct investor classes and stop the payment of financial planner fees. If you haven't already submitted your FICA documentation directly to Nedgroup Investments please attach as per the addendum, and submit with this form.

5. Financial planner details and declarations

Name of financial planning business

Name of financial planner Code

Contact number + (0)

I confirm that:

- I have made the disclosures required in terms of the Financial Advisory and Intermediary Services Act, 37 of 2002 (FAIS) to the investor.
- I have used the Effective Annual Cost calculator and explained all fees and charges that relate to this investment to the investor.
- I am authorised by the financial planning business to sell this investment / product in terms of FAIS.

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Financial planner signature

Date

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6. Investor declaration

I confirm and certify that:

- I am responsible for my investment decisions and have considered whether this investment is right for my needs.
- I confirm that all information provided in this application is true and correct and that I am not aware of any other information that may affect this application negatively.
- Where I am acting on behalf of another person, or as a representative of a legal entity, I confirm that I am duly authorised to complete and sign this form.
- I understand and agree that this application will be governed by the relevant and latest Investment Agreement and I have read and understood the Portfolio Characteristics document and the fund fact sheet that relates to the unit trust portfolios I am investing in.
- I have used the Effective Annual Cost calculator and I am aware of the charges that may be incurred.
- I authorise Nedgroup Investments to accept this instruction as submitted (electronically or otherwise) and agree that Nedgroup Investments will not be held liable for acting on this application and/or any instructions contained herein.
- The information contained in this form may be reported to the South African tax authorities.

Investor / Authorised signatory		Date	D D M M Y Y Y Y
Name		Capacity	
Authorised signatory (if applicable)		Date	D D M M Y Y Y Y
Name		Capacity	
Authorised signatory (if applicable)		Date	D D M M Y Y Y Y
Name		Capacity	
Authorised signatory (if applicable)		Date	D D M M Y Y Y Y
Name		Capacity	