

# InvestecBond Application form

## Please print clearly in block letters

Please fax this application form (pages 1 - 9), the required documentation and the proof of deposit to **0861 500 300** or **+27 11 263 6061** (international fax no.). Alternatively financial advisors can upload this instruction via our secure website at <https://www.secure.sso.za.investec.com>

No instruction will be processed unless all pages of the form and all required documentation have been completed and received by Investec Investment Management Services (Pty) Ltd (IMS).

This application form and the terms contained in the IMS Combined Terms Document will form the agreement between the investor and IMS. The contents of the IMS Combined Terms Document may be changed from time to time, and it is the responsibility of the investor to consult the most updated IMS Combined Terms Document, to determine the terms applicable to the relationship between the investor and IMS, and the terms relevant to IMS products. This document can be viewed on [www.investecassetmanagement.com](http://www.investecassetmanagement.com), alternatively a copy is available from your FSP or IMS.

For a copy of the fund's Minimum Disclosure Document, please contact the relevant investment fund manager.

## A. Investor details

Investor type Individual  or

Legal entity:- Close Corporation  Unlisted Company  Listed Company  Trust  Unincorporated entity

Title Surname/corporate/entity name

Name(s) of investor/authorised contact person

Residential address (principal place of business)

Code Country

Postal address

Code Country

Tel (home) (country code) ( )

Tel (work) (country code) ( )

Fax (country code) ( )

Tel (cell) (country code) ( )

Email

Preferred method of communication email  post

**Please note:** If no preference is selected and an email address is provided, the default method of communication will be email.

Method of identification:  Identity document  Passport (non-residents only)  Founding document

ID no./registration no./passport no. (non-residents only)

Country of issue (passport)

Date of expiry (passport)

DD / MM / YYYY

Date of birth

DD / MM / YYYY

Place of birth

Nationality

Married in community of property Yes  No  N/a

Occupation/nature of business activities (if an entity)

Are you an existing IMS investor Yes  No  N/a

If yes, existing investment no.  -  -  -

## B. Tax details of the investor

Registered South African taxpayer Yes  No  Tax no.

### Dividend withholding tax

Do you qualify for dividends tax exemption in terms of section 64F of the Income Tax Act Yes  No

If yes, please complete the "Dividends Tax Declaration and undertaking for exemption" available on [www.investecassetmanagement.com](http://www.investecassetmanagement.com). Failure to do so will result in dividends tax being withheld/payable.

### Interest withholding tax for non-South African residents

If you are a non-South African taxpayer, do you qualify for interest withholding tax reduction or exemption under section 50D/50E of the Income Tax Act Yes  No

If yes, please complete the "Interest Withholding Tax Declaration for non-South African residents" available on [www.investecassetmanagement.com](http://www.investecassetmanagement.com). Failure to do so will result in interest withholding tax being withheld/payable on applicable interest.

### FATCA<sup>1</sup>

Tax Regulations<sup>2</sup> require us to collect information about each investor's tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with SARS. If you have any questions about your tax residency, please contact your tax advisor. Should any information provided change in the future, please ensure you advise us of the changes promptly.

**Individual self-certification**

If you are not resident in any country(ies) for tax purposes, please tick this box  or

Please indicate all countries in which you are resident for tax purposes and the associated tax reference numbers in the table below.

Country / countries of tax residency (including South Africa)	Tax reference no. (for US citizen / resident TIN <sup>3</sup> )

**Legal entity self-certification**

For all legal entities, a legal entity self-certification form must be completed and submitted with the application form. Should you be a Passive Non-Financial Entity you will be required to submit individual self-certification forms for any Controlling Persons. The legal entity self-certification form and the individual self-certification form are available on [www.investecassetmanagement.com](http://www.investecassetmanagement.com)

**Please note:** Should your tax details change please notify IMS.

<sup>1</sup>The term "FATCA" refers to The Foreign Account Tax Compliance provisions contained in the US HIRE Act 2010.  
<sup>2</sup>The term "tax regulations" refers to regulations created to enable automatic exchange of information and include FATCA<sup>1</sup>, and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information.  
<sup>3</sup>The term "TIN" refers to the US Tax Identification No.

**C. Bank details of the investor**

Please supply proof of bank details (**a cancelled cheque or bank statement**)

Name of bank	Branch country
Branch name	Branch code
Name of account holder(s)	
Account no.	Type of account    Current <input type="checkbox"/> Savings <input type="checkbox"/>

Universal branch codes will be used for the following banks:

ABSA	632005	Nedbank	198765	Capitec	470010
Standard	51001	First National Bank	250655	Investec	580105

**D. Parent / legal guardian acting on behalf of a minor (if applicable)**

Title	Surname	
Name		
Residential address		
	Code	Country
Contact no. (country code) (    )		
Email		
ID no./passport no. (non-residents only)	Relationship to investor	

**E. Investment details**

		Tick relevant options
Product platform	iSelect FundSelect/FundChoice	Sections to be completed and notes <input type="checkbox"/> Should neither platform be selected the default, <input type="checkbox"/> iSelect will be applied
Investment type	Lump sum	<input type="checkbox"/> Section E, E1, E2, E3 - attach proof of deposit
	Electronic funds transfer Once-off debit	<input type="checkbox"/> Section E, E1, E2, E3 and F - Please note this amount is restricted to R500 000 and the bank details in Section C will be debited
	Recurring investments (debit order)	<input type="checkbox"/> Section G
Transfer	Unit transfer	<input type="checkbox"/> Section H (a) and H (d)
	Cash transfer	<input type="checkbox"/> Section H (b) and H (d)
	Share portfolio transfer	<input type="checkbox"/> Section H (c) and H (d)
Deals (for multiple sources)	Combine into a single deal Separate deals	<input type="checkbox"/> <input type="checkbox"/> Should no selection be made, a new deal will be created



**E4. Share portfolio**

Name of stockbroker \_\_\_\_\_ Name of share portfolio \_\_\_\_\_  
Mandate type  Discretionary (stockbroker managed)  Non-discretionary (IFA managed)

1. Please ensure that the relevant stockbroker addendum is completed.
2. \*Where the share portfolio is IFA managed the IFA must enter into an agreement with IMS. IMS cannot process this instruction unless the agreement with the IFA has been signed.

**F. Once-off debit authority**

I/We, the undersigned, request IMS to draw against my/our bank account in any manner agreed on between IMS and my/our bank the amount necessary for payment of the amount indicated in Section E above.

Once-off electronic collection is restricted to a maximum of R500 000. The alternative payment method for amounts exceeding R500 000 is an electronic fund transfer into the relevant product bank account.

- Please note:** This instruction is only possible providing the following criteria are met:
- The date the account is to be debited is a business day and all requirements have been met. The investor's account will be debited within two business days.
  - This instruction form may only be signed by the investor who must also be the account holder.
  - In the event that the investor is not a natural person, a resolution from the legal entity (trust, company, close corporation or partnership) giving the signatory(ies) authority to sign on behalf of the legal entity, may be required. IMS shall not be liable or responsible, for any reason, in the event that the signatory(ies) is/are not duly authorised and the signatory(ies) indemnifies IMS against any and all damages and/or loss arising from such event.

**Signature of bank account holder**

	Date DD / MM / YYYY
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**G. Recurring investments (debit order)**

**Bank debit order authority** Investor  Third party

I hereby request, instruct and authorise IMS or its assignees to draw against my account with the bank noted in section B (or any other bank or branch to which I may transfer my account), the sum of R \_\_\_\_\_ (amount in words)

being my contribution commencing on (date) 01 / MM / YYYY

Thereafter IMS or its assignees will endeavour to draw the amount on the 1st business day of each month in which such instalment becomes payable. I understand that all such withdrawals from my bank account shall be treated as though they had been signed by me personally.

Monthly  Quarterly  Bi-annually  Annually

Escalation date DD / MM / YYYY Escalation     % per annum

**Debit order fund selection**

Investment instruments	*FundSelect (tick)	% of debit order amount
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%

\*Investors without financial advisors or invested through the iSelect product platform may not select FundSelect in the tick boxes above.

**Please note:** If the investor is investing into the iSelect or FundSelect/FundChoice product, then the investor will be placed in the default class applicable to the associated financial advisor.

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**Third party details****Personal details for FICA purposes**Investor type    Individual     Close Corporation     Unlisted Company     Listed Company Trust     Unincorporated entity 

Title \_\_\_\_\_ Surname/corporate/entity name \_\_\_\_\_

Name(s) of authorised contact person \_\_\_\_\_

Residential address (principal place of business) \_\_\_\_\_

Code \_\_\_\_\_ Country \_\_\_\_\_

ID no. / passport no. (non-residents only) / registration no. \_\_\_\_\_

**Please note:** FICA declaration signed by the advisor is only applicable to the investor and not to the third party. Please provide the required FICA documentation.

**Third party bank account details**Please supply proof of bank details (**a cancelled cheque or bank statement**)

Name of bank \_\_\_\_\_ Branch country \_\_\_\_\_

Branch name \_\_\_\_\_ Branch code \_\_\_\_\_

Name of account holder(s) \_\_\_\_\_

Account no. \_\_\_\_\_ Type of account    Current     Savings 

- I agree to pay any bank charges and costs relating to the debit order authority.
- I acknowledge that I may cancel this authority by giving IMS not less than 30 calendar days' written notice.
- I agree that receipt of this instruction by IMS shall be regarded as receipt thereof by my bank.
- I agree that if IMS receives any of the information or required documentation relevant to this application after the monthly cut-off date for debit order business (usually around the 20th of the month), then the debit order will only commence in the following month.

**Authorised signature of third party bank account holder**

	Date    DD    /    MM    /    YYYY
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Initial and surname of signatory \_\_\_\_\_

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**H. Transfer of units, cash or share portfolios**

1. This instruction must be used where the investor holds existing unit trusts with another management company (MANCO) or Linked Investment Service Provider (LISP) and would like to transfer to the InvestecBond.
2. Either a unit, cash or share transfer may be done per application form submitted. Please complete the relevant section a), b) or c) below.
3. Please attach a statement from the MANCO/LISP or stockbroker not older than one month.
4. Please state the names of the transferring company(s) in the space provided below.

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5. Fees:
  - 5.1 No initial fees will apply to any of the below transfers.
  - 5.2 Consequently no initial fees will be paid to your Financial Services Provider (FSP), unless a FSP fee is indicated in the Financial Services Provider appointment section.

**a) Unit transfers**

**I/We hereby authorise the abovementioned unit trust manager(s) and/or LISP to transfer the specific units from my/our accounts detailed below into the InvestecBond.**

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Number of units \_\_\_\_\_

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Number of units \_\_\_\_\_

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Number of units \_\_\_\_\_

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Number of units \_\_\_\_\_

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Number of units \_\_\_\_\_

**b) Cash transfers (if allowed by Transferring Companies)**

**I/We hereby authorise the abovementioned unit trust manager(s) and/or LISP to convert the specific units/funds from my/our accounts detailed below to cash and transfer the proceeds to the following bank account:**

Name of account: Grayston Nominees (Pty) Ltd Investec Investor Bond  
 Name of Bank: Standard Bank  
 Branch: Killarney  
 Branch code: 007205  
 Account no: 001668609

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Amount R \_\_\_\_\_

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Amount R \_\_\_\_\_

Name of MANCO/LISP \_\_\_\_\_

Investment instrument name \_\_\_\_\_

Account no. \_\_\_\_\_ Amount R \_\_\_\_\_

**c) Share portfolio transfers**

**I/We hereby confirm that I/we have instructed the transferring stockbroker to transfer my/our share portfolio to the transferee stockbroker.**

Name of transferring stockbroker \_\_\_\_\_

Account no. \_\_\_\_\_

**d) Investment portfolio after completion of the transfer to IMS**

**Investments to be switched**

Source (From) Fund/share portfolio name(s)	*FundSelect (tick)	Amounts			Destination (To) Fund/share portfolio name(s)	*FundSelect (tick)	%
		Rands	%	Units			
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		
	<input type="checkbox"/>				<input type="checkbox"/>		

\*Investors without financial advisors or invested through the iSelect product platform may not select FundSelect in the tick boxes above.

- Please note:**
- If the investor is investing into the iSelect or FundSelect/FundChoice product, then the investor will be placed in the default class applicable to the associated financial advisor.
  - The destination fund selection above must be aligned to the product platform

## I. Income withdrawals

Total withdrawal amount R \_\_\_\_\_

If you have selected separate deals in section D please stipulate source deal for income:

Lump sum R \_\_\_\_\_

Transfer R \_\_\_\_\_

Frequency Monthly  Quarterly  Bi-annually  Annually

Income source Proportionate across all funds  Nominated

Annual escalation     % (if applicable)

### Nominated instruments (only applicable if "Nominated" is selected above)

Investment instruments (excluding share portfolios)	*FundSelect (tick)	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
_____	<input type="checkbox"/>	%
<b>Total</b>	<input type="checkbox"/>	<b>100%</b>

\*Investors without financial advisors or invested through the iSelect product platform may not select FundSelect in the tick boxes above.

- Regular withdrawals cannot be made from a debit order investment or from the share portfolio portion of the investment.
- Please indicate if the nominated instrument is a FundSelect instrument, failing which the non-FundSelect class of the same instrument will be nominated where relevant.
- If a proportionate withdrawal has been selected above, withdrawals will be generated by redeeming instruments proportionately across the investor's entire portfolio. If the investor has selected withdrawals from a nominated source above, withdrawals will be generated by redeeming the nominated instruments only. If one of the nominated instruments has insufficient value, IMS will draw the total withdrawal amount proportionately from the remaining nominated instrument(s). If there is insufficient value in all of the nominated instrument(s), IMS will automatically revert to drawing the amount proportionately from all available instruments, until further funds become available in the nominated instruments.

## J. Special instructions

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## K. Declaration by investor

I/We have read, understand and agree to be bound by the provisions of this application form as well as the terms contained in the latest version of the IMS Combined Terms Document.

I/We warrant that the information contained herein is true and complete, and that, if this application form is signed in a representative capacity, I/ we have the necessary authority and capacity to do so and that this transaction is within my/our powers.

I/We consent to IMS processing my/our personal information as described in the IMS Combined Terms Document. I/We further confirm that the information provided by me/us is true and correct and undertake to notify IMS should any of the information change.

### Signature of investor

	Date DD / MM / YYYY
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### Signature of authorised signatory / guardian of investor

	Date DD / MM / YYYY
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Name of authorised signatory \_\_\_\_\_

Capacity of authorised signatory \_\_\_\_\_

**Please note:** Should you not wish to receive any marketing information you may opt-out by emailing IMS on [unsubscribe@investecmail.com](mailto:unsubscribe@investecmail.com).

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## L. Financial Services Provider appointment

### To be completed by the investor

1. I/We appoint \_\_\_\_\_ as my/our financial advisor(s) as  
the authorised representative of \_\_\_\_\_  
[Financial Services Provider (FSP)]; FSP no. \_\_\_\_\_.
2. In the case where my/our FSP is an approved investment manager/discretionary financial services provider, I/we agree and understand that he/she may give IMS investment instructions directly, and I/we herewith authorise IMS to adhere to this financial advisor's instructions on my/our behalf.

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## M. Financial advisor fee

Fee type	Percentage (excluding VAT)
<b>Initial fees</b>	
Initial lump sum fee in respect of FundChoice, iSelect and FundSelect funds	%
Initial debit order fee in respect of FundChoice, iSelect and FundSelect funds	%
Initial fee in respect of transfer indicated in Section G	%
<b>Annual fees</b>	
Annual fee for FundChoice and iSelect funds (annual fees in respect of FundSelect instruments are set out in the IMS Combined Terms Document)	%
Annual fee in respect of the share portfolio	%

- Please note:**
- Should a fee percentage not be indicated above, **the fee will default to zero.**
  - Only fees applicable to this application form and corresponding to the relevant completed section should be indicated in the table above.

### Signature of investor

	Date DD / MM / YYYY
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Name of investor \_\_\_\_\_

### Signature of authorised signatory / guardian of investor

	Date DD / MM / YYYY
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Name of authorised signatory \_\_\_\_\_

Capacity of authorised signatory \_\_\_\_\_



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**N. Declarations by FSP**

Name of FSP	Code
Name of financial advisor(s)	Code
Tel	
Fax	
Email	
Name of alternate contact person at FSP	
Tel	
Fax	
Email	

A financial advisor fee rebate of  % will be re-invested into the investor's investment reducing the financial advisor fee in the case of FundSelect instruments. The FundSelect fee rebate does not include VAT. VAT on the original fee is applied.

Please tick the applicable declaration(s)

- FAIS declaration** – I/We confirm that I am/we are an authorised FSP in terms of FAIS.
- FICA declaration** – I/We hereby confirm that the independent FSP, is the primary accountable institution (as described in the regulations to FICA) in respect of the investors on whose behalf I/we establish business relationships or conclude single transactions with IMS (the secondary accountable institution), and that I/we will have established and verified the identity of each such investor in terms of section 21 of FICA. I/We confirm that I/we will keep a record of the investors' records as is required in terms of section 22 of FICA.
- Please note: Should the FSP not wish to make use of the FICA declaration please refer to the FICA documentation checklist available on [www.investecassetmanagement.com](http://www.investecassetmanagement.com) and attach all the relevant FICA documents to the application form.**
- Share portfolio declaration** – I/We confirm that we are appropriately licensed in terms of FAIS to provide advice and/or intermediary services in respect of and/or manage a share portfolio on behalf of the investor.

**Signature of appointed representative of FSP**

     	Date DD / MM / YYYY
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Initial and surname of appointed representative of FSP

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**O. Complaints procedure**

For information regarding our complaints procedure please go to our website at:

<http://www.investecassetmanagement.com/south-africa/footer-menu/complaints/>.

# Investor documentation checklist

- Please note:**
- Investors are obliged to submit the following documentation to IMS, together with their signed application forms
  - Additional documentation may be requested to satisfy FICA requirements. The FICA requirements are detailed on a separate FICA documentation checklist on [www.investecassetmanagement.com](http://www.investecassetmanagement.com)
  - Investors must notify IMS of any changes to their details and fax updated documentation to 0861 500 300 or +27 (11) 263 6061 (international fax no.).

## Individual investor/sole proprietors/partners to a partnership agreement

<input type="checkbox"/>	copy of ID of each individual investor/sole proprietor/partner (+ one specimen signature), <b>or</b>
<input type="checkbox"/>	copy of passport (if non-resident), <b>and</b>
<input type="checkbox"/>	cancelled cheque/bank statement bearing the logo of the bank as proof of the bank details in the name of the individual/partnership, <b>and</b>
<input type="checkbox"/>	dividends tax declaration (if applicable) <b>and</b>
<input type="checkbox"/>	power of attorney (if applicable) <b>and</b>
<input type="checkbox"/>	unabridged birth certificate/court order appointing legal guardian (if minor investor)

## Close Corporations

<input type="checkbox"/>	copy of CK1 (certificate of registration), and a copy of CK 2A where applicable (name change certificate), <b>and</b>
<input type="checkbox"/>	resolution of members appointing authorised signatories to act on behalf of the close corporation in respect of this investment, <b>and</b>
<input type="checkbox"/>	cancelled cheque/bank statement bearing the logo of the bank as proof of bank details in the name of the CC, <b>and</b>
<input type="checkbox"/>	copy of ID for each authorised signatory (+ one specimen signature), <b>and</b>
<input type="checkbox"/>	dividends tax declaration

## Companies

<input type="checkbox"/>	copy of CM1 or CoR 14.3 (certificate of incorporation), <b>and</b>
<input type="checkbox"/>	copy of CM29 or Form CoR 39 (list of directors), <b>and</b>
<input type="checkbox"/>	resolution of directors appointing authorised signatories to act on behalf of the company in respect of this investment, <b>and</b>
<input type="checkbox"/>	cancelled cheque/bank statement bearing the logo of the bank as proof of bank details in the name of the company, <b>and</b>
<input type="checkbox"/>	copy of ID for each authorised signatory (+ one specimen signature), <b>and</b>
<input type="checkbox"/>	dividends tax declaration

## Trusts

<input type="checkbox"/>	copy of trust deed or copy of other document by which trust is created, <b>and</b>
<input type="checkbox"/>	letters of authority (as issued by the Master of the High Court), <b>and</b>
<input type="checkbox"/>	resolution of trustees appointing authorised signatories to act on behalf of the trust in respect of this investment, <b>and</b>
<input type="checkbox"/>	cancelled cheque/bank statement bearing the logo of the bank as proof of bank details in the name of the trust, <b>and</b>
<input type="checkbox"/>	copy of ID for each of the authorised signatories only (+ one specimen signature), <b>and</b>
<input type="checkbox"/>	list of names of beneficiaries, <b>and</b>
<input type="checkbox"/>	dividends tax declaration (if applicable)

## Retirement funds

<input type="checkbox"/>	copy of proof of Financial Services Board (FSB) registration number (copy of registration certificate/letter from the FSB confirming / containing registration number), <b>and</b>
<input type="checkbox"/>	resolution of trustees appointing authorised signatories in respect of this investment, <b>and</b>
<input type="checkbox"/>	signatory list (this could sometimes form part of the resolution), <b>and</b>
<input type="checkbox"/>	cancelled cheque/bank statement bearing the logo of the bank as proof of bank details of the Retirement Fund, <b>and</b>
<input type="checkbox"/>	copy of ID's for each authorised signatory (+ one specimen signature), <b>and</b>
<input type="checkbox"/>	dividends tax declaration

## Other entities

<input type="checkbox"/>	copy of document by which the entity is founded, and
<input type="checkbox"/>	resolution appointing authorised signatories to act on behalf of the entity in respect of this investment, and
<input type="checkbox"/>	cancelled cheque/bank statement bearing the logo of the bank as proof of bank details in the name of the entity, and
<input type="checkbox"/>	copy of ID for each authorised signatory (+ one specimen signature), and
<input type="checkbox"/>	dividends tax declaration (if applicable)

## Client Service Centre

100 Grayston Drive Sandown Sandton 2196  
PO Box 785700 Sandton 2146  
Telephone: 0860 500 100  
Fax: 0861 500 300 or (2711) 263-6061  
email: [comcentre@investecmail.com](mailto:comcentre@investecmail.com)

[www.investecassetmanagement.com](http://www.investecassetmanagement.com)

**Investec Investment Management Services (Pty) Ltd**  
(Reg. No. 1992/003608/07)

Investec Asset Management and Investec Investment Management  
Services are authorised financial services providers