

This form should be completed if you wish to change your personal, company or trust details that the Administrator has on record.

A. IMPORTANT INFORMATION

PSG Collective Investments (RF) Limited administers the unit trusts. It is authorised to do so as a manager in terms of the Collective Investment Schemes Control Act. In this form it is referred to as PSG Asset Management. **If you require assistance in completing this application, please contact Client Services on 0800 600 168.**

- The completed form, together with supporting documentation, should be **emailed to local.instructions@psgadmin.co.za** or faxed to PSG Asset Management, on +27 (11) 263 6099. Please refer to the rules regarding faxed and e-mailed instructions as set out in the Terms and Conditions under Section O of the application form.
- Complete all sections of this form.
- Take note that PSG Asset Management will only process this instruction when all required documentation is received. Further information or documentation may be requested.

B. EXISTING INVESTOR DETAILS

Investor number	<input type="text"/>
Full name and surname / Entity name	<input type="text"/>
ID number/ Passport number / Registration number	<input type="text"/>
Contact number	<input type="text"/>

C. CHANGE OF INVESTOR DETAILS

Physical address (old)	<input type="text"/>		
	<input type="text"/>		
Country	<input type="text"/>	Postal code	<input type="text"/>
Physical address (new)	<input type="text"/>		
	<input type="text"/>		
Country	<input type="text"/>	Postal code	<input type="text"/>
Postal address (old)	<input type="text"/>		
	<input type="text"/>		
Country	<input type="text"/>	Postal code	<input type="text"/>
Postal address (new)	<input type="text"/>		
	<input type="text"/>		
Country	<input type="text"/>	Postal code	<input type="text"/>
Tel. Home (old)	<input type="text"/>	Tel. Work (old)	<input type="text"/>
Tel. Home (new)	<input type="text"/>	Tel. Work (new)	<input type="text"/>
Cellphone (old)	<input type="text"/>	Cellphone (new)	<input type="text"/>
Email address (old)	<input type="text"/>		
Email address (new)	<input type="text"/>		

Attach a certified copy of proof of your physical address (not older than 3 months).

Indicate whether you would prefer to receive correspondence by email or post

Email Post

Change of marital status	Surname (old)	<input type="text"/>	Status (old)	<input type="text"/>
	Surname (new)	<input type="text"/>	Status (new)	<input type="text"/>

Attach a certified copy of your marriage certificate with three specimen signatures.

A **domestic prominent influential person** is an individual who holds including in an acting position for a period exceeding six months, or has held at any time in the preceding 12 months, in the Republic, a prominent public function including that of: The President or Deputy President, A government minister or deputy minister, The Premier of a province, A member of the Executive Council of a province, An Executive mayor of a municipality, A leader of a political party, the head, accounting officer or chief financial officer of a national or provincial department, all municipal managers, chairperson of the controlling body of a public entity listed to the Public Finance Management Act, an executive officer of a Municipal entity, member of a royal family, a constitutional court judge, an officer of the South African National Defence Force above the ranking of the major general, an ambassador or high commissioner or other senior representative of a Foreign government based in the Republic, the position of chairperson of the Board of Directors and other executives of the a Company as defined in the Company's Act, if the company provides goods or services to an organ or state and the position of head or other executive directly accountable to that head of an international organization based in the Republic.

Are you a domestic prominent influential person or a foreign prominent public official?

Yes No

D. TAX DETAILS

Has your, or any associated controlling person's, tax residency changed to any country other than South Africa?

Yes No

If 'Yes', please complete and attach the Foreign Taxation Self-Certification form available on our website, www.psg.co.za/asset-management/forms.

E. NEW BANK ACCOUNT DETAILS

Account holder name Account Current Transmission Savings
Bank name Branch Code
Branch name Account number

- Please attach a cancelled cheque or certified copy of a recent bank statement for verification purposes.
- Payments and debit order deductions can only be made into or from the above bank account types and not into a credit card, bond or money market account.
- Should the Investor and Premium Payer not be the same person, a certified copy of the Premium Payer's Identity Document with three specimen signatures, as well as proof of physical address (not older than 3 months) must be attached.
- Bank details will be verified using an external source and may be followed up with a telephone call to the owner of the account in order to confirm bank details and the transaction.

Signed at (place) on this day of 20

Signature of bank account holder

Signature of parent or guardian (if applicable)

Purpose of bank account: Regular withdrawal payment* Monthly debit order** Redemption

*Should this change relate to change of bank details in terms of your Regular Withdrawal Payment then we need to receive this instruction by latest the 13th of the month in order for the change to be effective in the same month. Instructions received after the 13th will be processed for the following month.

** Should this change relate to change of bank details in terms of your Monthly Debit Order then we need to receive this instruction by latest the 20th of the month in order for the change to be effective in the same month. Instructions received after the 20th will be processed for the following month.

F. AUTHORISED REPRESENTATIVE DETAILS (Investor represented by parent/guardian or third party in terms of a Power of Attorney)

Title Surname
Initials First name
Method of identification Identity document
Passport (non-residents)
ID no./Passport no. (non-residents) Date of birth
Country of issue Passport expiry date
Country of citizenship Country of birth
Postal address

Country Postal code
Physical address or
principal place of business
Country Postal code
Email address
Telephone home Telephone work
Cellphone Fax
Relationship to client

G. TERMS AND CONDITIONS

- This instruction form may only be signed by the Investor or the Investor's authorised representative. Where this instruction form is signed on behalf of the Investor, the signatory warrants that he/she has authority to do so, that the information contained herein is correct in all respects and that he/she indemnifies PSG Asset Management against any and all damages and/ or loss arising from such event.
- In the event that the Investor is not a natural person, a resolution from the legal entity giving the signatory/(ies) authority to sign on behalf of the legal entity, will be required. In the event that the signatory/(ies) is/are not duly authorised, the signatory/(ies) indemnify PSG Asset Management against any and all damages and/or loss arising from such an event.
- PSG Asset Management will not be liable for any loss incurred by the Investor due to incorrect information being supplied by the Investor.
- PSG Asset Management reserves the right to withhold processing on any unclear, incomplete or ambiguous instructions received from the Investor.
- Should this instruction form be faxed or emailed to PSG Asset Management the responsibility to make sure the instruction was received will rest with the Investor. A fax or email confirmation receipt in the hands of the sender will not qualify as sufficient proof of receipt.
- PSG Asset Management will not be liable for any damages or losses arising out of PSG Asset Management processing an instruction received from the Investor or its mandated Financial Adviser or failure to action this instruction due to circumstance beyond its control.

H. SIGNATURES

Signed at (place) on this day of 20

Signature of Investor(s)/Authorised Signatory/(ies)

Signature of parent or guardian (if applicable)

Official capacity (if other than Investor)

I. CONTACT DETAILS

PSG Collective Investments (RF) Limited

1st Floor, PSG House

Alphen Park

Constantia Main Road

Constantia 7806

Private Bag X3, Constantia, 7848

Toll free: 0800 600 168

Fax: +27 (11) 263 6099

Email: local.instructions@psgadmin.co.za (local unit trusts) and offshore.queries@psgadmin.co.za (offshore unit trusts)

Website: www.psg.co.za/asset-management