

1. IMPORTANT INFORMATION

- PSG Invest (Pty) Ltd, an authorised administrative financial services provider, is the Administrator of this investment.
- It may be in your best interest to obtain advice before concluding this transaction. It is suggested that you approach a Financial Adviser in this regard.
- By concluding this transaction on your own, you acknowledge that you have done so of your own accord and not based on the advice of the Administrator.
- All instruction forms can be obtained from the Client Services Department at 0860 774 774 or at www.psg.co.za.
- Please complete all relevant sections of this instruction form.
- Please take note that the Administrator will only process this instruction when all required information and documentation is received. The Administrator may request further information or documentation if required.
- Please submit instructions for processing to instructions@psg.co.za or fax to 011 996 5499.
- For enquiries, please e-mail clientservice@psg.co.za or contact one of our consultants on 0860 774 774.
- Please ensure that you read the terms and conditions applicable to your investment, which are available from the Client Services Department, as these may have changed since your original investment date.
- If you would like a detailed statement of your investment(s), please obtain it from your Financial Adviser or our Client Service Centre on 0860 774 774. If you would like online access to your investment(s), please complete the Investor Secure Website Registration Form and e-mail it to clientservice@psg.co.za or fax it to 011 996 5499.

2. INVESTOR DETAILS

Name of Investor

Investment number

Identity/Registration number

3. RECURRING CONTRIBUTION INVESTMENT DETAILS

Recurring investment amount via Debit order (R500 minimum) R

Debit order start date

Frequency Monthly Quarterly Half-yearly Yearly

Escalation (per year) %

DESTINATION FUND NAME FOR RECURRING INVESTMENT PORTION	PERCENTAGE
<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/> %
Total	100%

Cancel my debit order

4. RECURRING WITHDRAWAL DETAILS

Withdrawal amount R Escalation (per year) %

Withdrawal frequency Monthly Quarterly Half-yearly Yearly

Income payment date

Please note that we cannot guarantee payments on specific dates, but will endeavour to pay the income as close to this date as possible.

SOURCE FUNDS FOR WITHDRAWAL

FUND NAME(S)	FUND CLASS	AMOUNT	PERCENTAGE
<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"/> %
Total			100%

- If the selected day falls on a weekend or public holiday it will be effective on the following business day.
- The Administrator must receive the instruction seven working days before the required date of payment for payment to take place on that day.
- All payments are made electronically to the bank account of the registered Investor only.
- No payments will be made to credit card accounts or market-linked accounts.

Cancel my recurring withdrawal

5. BANK ACCOUNT DETAILS

Account holder name	<input type="text"/>	Account	<input type="checkbox"/> Current	<input type="checkbox"/> Transmission	<input type="checkbox"/> Savings
Bank name	<input type="text"/>	Branch Code	<input type="text"/>		
Branch name	<input type="text"/>	Account number	<input type="text"/>		

- Please attach a cancelled or certified copy of a cheque not older than 3 months or a certified copy of a recent bank statement not older than 3 months 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 as well as physical address (not older than 3 months) will be required.

Signed at (place) this day of 20

Signature of bank account holder

Signature of parent or guardian (if applicable)

6. PREFERRED FEE FUND

You may choose to have your on-going Investment Administration fee and on-going Financial Advisory Fee for all portfolios in your investment, deducted from a specific fund instead of proportionately from each fund. This will be known as your Preferred Fee fund.

Do you require a Preferred Fee fund? Yes No

FUND NAME	FUND CLASS

If the balance in the Preferred Fee fund is insufficient, the Administrator will deduct the fees proportionally from the remaining portfolio.

7. DECLARATION AND AGREEMENT BY INVESTOR

- The above answers and any additional statements made, whether by my hand or not, are true and complete and are to form the basis of the contract with the Administrator.
- No statement, whether made by myself or any other person, shall be binding on the Administrator unless provided in writing to the Administrator and made part of the investment contract.
- I accept the terms and conditions, as set out in the investment documentation relevant to the product I am invested in, as the relevant terms and conditions applicable to this investment.
- I confirm that the Administrator may accept signed instructions by fax or e-mail. As a result I hereby waive any claim that I may have against the Administrator and indemnify the Administrator against any loss incurred as a result of the Administrator receiving and/or acting upon such communication. Furthermore, the Administrator will not be held responsible for any failure, malfunction or delay of any network or electronic or mechanical device or any other form of communication used in the submission, acceptance and processing of application forms and/or transactions. the Administrator will not be liable to make good or compensate any investor or third party for any damages (whether direct or consequential), losses, claims or expenses resulting therefrom. The Investor and any third party indemnify the Administrator accordingly.
- I have not received any advice from the Administrator in respect of this application/instruction.
- Trusts (if applicable): I hereby declare that the instruction is in accordance with stipulations in the trust deed.
- I hereby state that the FICA documentation in possession of the Administrator is up to date. I accept that it is my responsibility to provide the Administrator and my Financial Adviser with up to date FICA documentation as required by the Financial Intelligence Centre Act, 38 of 2001. I indemnify and hold the Administrator harmless against any loss or damage which I may suffer as a result of any obligations imposed on the Administrator by this law.

8. STANDARD TERMS AND CONDITIONS

- This instruction form may only be signed by the Investor or by a registered investment manager/discretionary Financial Services Provider acting on behalf of the Investor. 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 the Administrator 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, may be required. In the event that the signatory/(ies) is/are not duly authorised, the signatory/(ies) indemnify the Administrator against any and all damages and/ or loss arising from such an event.
- The Administrator will not be liable for any loss incurred by the Investor due to incorrect information being supplied by the Investor.
- The Administrator 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 the Administrator 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.
- The Administrator will not be liable for any damages or losses arising out of the Administrator's processing an instruction received from the Investor or its mandated Financial Adviser or failure to action this instruction due to circumstance beyond its control.
- The Administrator will at all times endeavour to deliver in the timeframes provided for in terms of the terms and conditions, however this may be extended due to unforeseen circumstances which the Administrator has no control over.
- Please note that, where applicable, any capital gain realised on the disposal of a participatory interest in a collective investment scheme is subject to Capital Gains Tax. Please ensure that you discuss this with your appointed Financial Adviser or a tax consultant.
- PSG Wealth Tax Free Investment Plan: If you select a fund that later does not qualify for the PSG Wealth Tax Free Investment Plan, we will inform you and request a switch instruction. If we do not hear from you in 30 days of our request, we will switch you into a default money market fund.

- The necessary FICA documentation, as required, must be supplied before any instructions will be processed, unless we have your current documents on record.
- Balances that remain in a fund following a 100% switch out/rebalance out/withdrawal from this fund will not automatically follow the original transaction to the required destination fund or bank account. Such residual balances may be caused by reinvested distributions or the release of units that were reserved for another transaction at time of instruction.
- Where applicable, the investment might be underwritten by PSG Life Limited.

9. SIGNATURES

I/We, the undersigned and legal owner/s, confirm that all information provided on this instruction form is correct, and that I/ we acknowledge and accept the terms and conditions relevant to this investment and accept the implications thereof. The Investor understands that in terms of the Financial Advisory and Intermediary Services Act, 2002 (“FAIS”), his Financial Adviser must be mandated by a licensed Financial Services Provider (“FSP”) as a representative with the necessary FAIS sub - categories to act on the Investor’s behalf and that it is also the Investor’s responsibility to determine whether his Financial Adviser has the necessary authorisation. (FSB toll free number: 0800 110443). The Investor understands and confirms that the Administrator is entitled to act on his Financial Adviser’s instructions, whether in written or electronic format, as if they were the Investor’s own instructions. The Investor hereby indemnifies the Underwriter and/or Administrator against all losses or damage, which he may sustain, as a result of transactions entered into on the basis of this delegation of authority by the Investor to the Financial Adviser. If a Financial Adviser is not mandated as required by the Financial Services Board, the Administrator is obliged by law to decline any instructions from such Financial Adviser. The Administrator may and will accept instructions on the strength of the Investor’s signature. The Investor hereby authorises the Administrator to obtain information from the appointed FSP, Financial Adviser or administrative assistant where the Investor has failed to include such information in the application or transaction form. This authorisation is subject to the Administrator obtaining documentary proof where necessary.

Signed at (place) this day of 20

Signature of Investor/ Authorised Signatory

Signature of Financial Adviser (if applicable)

10. CONTACT DETAILS

1st Floor, Roland Garros, The Campus, 57 Sloane Street, Bryanston, 2191
 PO Box 61295, Marshalltown, 2107
 Sharecall: 0860 774 774
 Fax: +27 (0) 11 996 5499
 E-mail: clientservice@psg.co.za
 Website: www.psg.co.za