

Instructions

1. This application and supporting documentation must be emailed to instruct@ashburtoninvest.co.za.
2. Please complete all relevant sections of this application in order for us to process this investment.
3. Terms and Conditions are available on our website at www.ashburtoninvestments.com, from our Client Service Team on 0860 274 287, or from your financial advisor. By signing this form you acknowledge that you have read and understood these, and that you will be bound by such Terms and Conditions.
4. All valid instructions received before 2pm on a business day, will be processed on the same day and receive the closing price of the following business day.
5. Documentation required in order for us to process your application:
 - a. Proof of deposit (if applicable);
 - b. Proof of bank details;
 - c. Recognition of Transfer from transferring fund;
 - d. If you are investing in a Personal Share Portfolio please complete the addendum which is available on our website.
6. The Administrator will only process this application when all required documents are received and, if applicable, the deposit reflects in the bank account specified at the end of this form or your latest statement from the transferring fund.

FNB Investor Services Proprietary Limited ("Administrator"), Registration Number 2011/139123/07, is an authorised administrative financial services provider (FSP Number 44341) and is the administrator of this investment.

1. Investor details

Investor ID: _____ Contract number:

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Individual investor

Title: _____ Surname: _____

First name(s): _____

ID/Passport number:

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Date of birth:

Y	Y	Y	Y	M	M	D	D
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 Contact number:

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Person acting on behalf of investor

Title: _____ Surname: _____

First name(s): _____

ID/Passport number:

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Date of birth:

Y	Y	Y	Y	M	M	D	D
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 Contact number:

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2. Source of funds

Please indicate the source of funds:

- | | | | |
|---|--------------------------------------|---|--|
| <input type="checkbox"/> Sale of investments | <input type="checkbox"/> Bonus | <input type="checkbox"/> Savings/Bank account | <input type="checkbox"/> Property sale |
| <input type="checkbox"/> Assets of trust/Investment company | <input type="checkbox"/> Inheritance | <input type="checkbox"/> Salary | |

Other (specify): _____

Please note that in certain circumstances we may request additional information.

3. Payment details and bank debit authority

The minimum additional investment amount is R2 000. The minimum monthly debit order amount is R500.

Please select the relevant option:

- Electronic/internet transfer
 Electronic collection by the Administrator/once-off debit (maximum R1 000 000)
 Recurring debit order investment

Is this a Section 14 transfer? Yes No

Please indicate which of the following applies and provide the detail requested below.

- A transfer from an employer's fund
- A transfer from a Pension interest in a divorce order
- A transfer from another retirement annuity fund (Section 14)

Registered name of transferor fund: _____

Policy/ Investment number: _____

Estimated amount to be transferred: R

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Lump sum investment

Investment amount: R

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If you require a phase-in, please specify the immediate investment percentage _____ %, the balance to be phased-in over _____ months (between 3 and 24).

If the Administrator is collecting the money from the specified bank account, indicate the once-off debit date.

Please sign the debit authority below.

Y	Y	Y	Y	M	M	D	D
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Recurring debit order investment

Recurring debit order investment amount: R

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Debit order frequency:

- Monthly
- Quarterly
- Half-yearly
- Annually

Debit order deduction date:

01 or 16 or 21 or 26 of

M	M	Y	Y
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Please note that if no debit order deduction date is selected by the investor the first of the month will be used.

Next escalation date:

Y	Y	Y	Y	M	M	D	D
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Annual escalation: _____ %

Debit order and once-off debit authority

If the bank account for debit orders is different to the one on record please complete bank details for debit orders and/or once-off debits here.

Please supply proof of bank details (a cancelled cheque or relevant bank statement or letter on bank's letterhead with bank stamp not older than 3 months).

Name of bank: _____

Branch code:

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

 Branch name: _____

Account name: _____

Country: _____

Account no.:

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Type of account: Current Savings

I hereby authorise the Administrator to draw direct debits or the specified once-off debit amount against the bank account specified. Direct debits can only be processed from a South African bank account. Units bought with a direct debit can only be redeemed after forty (40) calendar days. If the bank account holder is not the same as the investor (3rd party contribution) then the actual account holder must sign below as authority to debit their bank account and must provide full FICA documentation as per the requirements listed in the Checklist available on our website. If the bank account holder is not the investor, he/she acknowledges that the Administrator does not make third party payments, payment will only be made to the investor unless the investor is a minor.

The Administrator will debit your account within two (2) business days of receiving a valid and complete application and supporting documents or on the date specified on the application form.

In the event that the collection day falls on a Sunday or a recognised South African public holiday, the collection day will automatically be the next ordinary business day.

I agree that although this authority and mandate may be cancelled by me, such cancellation will not cancel this FNB Retirement Annuity . I shall not be entitled to any refund of amounts which the Administrator has withdrawn while this authority was in force. I acknowledge that this authority may be ceded or assigned to a third party if this FNB Retirement Annuity is also ceded or assigned to that third party, but in the absence of such assignment of this FNB Retirement Annuity , this authority and mandate cannot be assigned to any third party.

Please note that the reference for the direct debit on your bank account will be “<FNB Invest><Investor ID-Contract number>”.

Please ensure that the account the Administrator is debiting allows debits.

Signature of investor/bank account holder: _____

Date:

Y	Y	Y	Y	M	M	D	D
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4. Investment allocation

Your selected combination of unit trusts must at all times comply with the asset allocation limitations as stipulated in the Prudential Investment Guidelines of Regulation 28 of the Pension Funds Act, 1956 (Act No. 24 of 1956). Regulation 28 limits the maximum exposures that retirement fund savings may have to various asset classes. Broadly speaking the maximum exposures to the various asset classes are:

Cash	100%
Debt instruments	
(Government issued or guaranteed)	100%
(Corporate)	75%
Equities	75%
Property	25%
Foreign assets	30%

Many of the unit trusts available on this platform are Regulation 28 compliant and this will be specified on the Fund List.

Please ensure that your chosen investment allocation is Regulation 28 compliant by consulting with your financial advisor. Alternatively, please use the Regulation 28 calculator on our website or contact our Client Service Team. In the event that we receive an instruction that is not Regulation 28 compliant, we will contact you.

Lump sum allocation

Instrument name	Recurring %
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
Ashburton Money Market Fund - Fee Account*	%
Total	100%

*Where you have selected to invest in a Personal Share Portfolio, a minimum of 2% of the lump sum investment amount must be allocated to the Ashburton Money Market Fund – Fee Account from which the administrator will deduct the annual administration fee and advice fee.

Recurring investment allocation

Instrument name	Recurring %
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
Ashburton Money Market Fund - Fee Account	%
Total	100%

Please note that Personal Share Portfolios are not available for phase-in instructions or recurring investments.

5. Declaration by financial services provider (“FSP”)

The FSP/authorised representative, by appending his/her signature hereto, states and declares that he/she has read and understood the Terms and Conditions pertaining to this investment product; warrants that all statements given by him/her in the application form are true and correct in every respect and that such statements shall form the basis of the contract, which is to be entered into, between the investor and the Administrator, as well as the contract between the investor and the FSP/authorised representative as regards the FSP/authorised representative. All statements made, and details supplied by him/her on the investor’s behalf, whether by his/her own hand or otherwise, are true and correct, and the Administrator is entitled to regard them as such for the purposes of considering the investor’s application to invest in the account, as well as for the purposes of paying any fees to the FSP/representative; and has adhered to all the requirements of the FAIS Act and its applicable subordinate legislation and Codes of Conduct in the course of rendering financial services to the investor.

The FSP/authorised representative further acknowledges that he/she is aware that the investor will be screened and profiled by the Administrator in terms of the Administrator’s FICA requirements, and may be required to submit additional supporting documentation such as financial statements and asset and liability statements where the investor falls within a certain risk category as defined by the Administrator. The FSP/authorised representative acknowledges that he/she has personally explained all the fees and commissions applicable to this investment to the investor.

Signature of FSP/
Authorised representative: _____

Date:

Y	Y	Y	Y	M	M	D	D
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6. Declaration by investor

By signing this application form, the investor declares that:

1. I warrant that all information and declarations provided by me in this form and all supporting documentation in connection with this application are true, correct and accurate in every respect.
2. I have read, understood and agree to the Terms and Conditions available on www.ashburtoninvestments.com or from the Client Service Team on 0860 274 287 and agree to be bound by such Terms and Conditions.
3. I confirm that the Administrator has not given me any advice in respect of the tax, legal, accounting, regulatory and/or financial consequences of investing in this investment.
4. I confirm that the money that I am investing in terms of this application form is not derived from the proceeds of any unlawful activities as defined and contemplated in the Prevention of Organised Crime Act, (Act No. 121 of 1998) ("POCA").
5. I fully understand the information and the risks that come with this investment and where I have a financial advisor, I confirm that the information on this investment product has been fully and adequately explained to me by my financial advisor.
6. I agree and understand that if I have elected not to have a financial advisor that the Administrator is unable to provide updates on legal changes and/or industry developments, and that the Administrator will not be monitoring my investment compared to my personal investment goals.
7. I have carefully read, understood and accept the latest Terms and Conditions and confirm that the FNB Retirement Annuity Fund is based upon the Terms and Conditions, this application form and all supporting documentation as per the Checklist.
8. Your existing fee structure will apply. If you would like a different initial fee for this transaction, please specify it below, excluding VAT.

Note: No initial fees can be charged on Section 14 transfers

Initial advice fee (max 3%, excluding VAT): _____ %

Signed at _____

Date:

Y	Y	Y	Y	M	M	D	D
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Signature of investor (or duly authorised person(s) where applicable): _____

Signature of person acting on behalf of investor (if applicable): _____

Capacity of person acting on behalf of investor: _____

7. Retirement Annuity details

If you are an individual, sole proprietor or partnership please use these banking details:

FSCA registration number: 12/8/38102
SARS number: 7950783961

Bank: First National Bank
Account name: FNB Retirement Annuity Fund
Branch code: 250655
Branch name: FNB Universal code
Account number: 62432390136
Reference number: Your ID number if a new investor or your Investor ID if you are an existing investor