



- All sections must be completed in full using BLOCK LETTERS.
- Indicate all options selected by means of a cross [X].
- Initial any amendments made to the application form.
- Ensure that all information provided is accurate.
- No instruction will be processed unless all requirements have been met.
- The daily cut-off for receipt of instructions is 12h00 and 10h00 for Money Market Fund instructions.

- You may opt to complete this form digitally - it requires Adobe Acrobat Reader DC. Download it to your device by clicking on the icon above.
- Completed forms should be faxed to +264 (61) 249 444, emailed to [clientservices@namasset.com.na](mailto:clientservices@namasset.com.na) or by clicking the Submit Form button.
- Should you have any queries regarding this application, please contact us on +264 (61) 275 700.

COMPLETE THIS  
FORM DIGITALLY



A

### ENTITY DETAILS

Name of Entity:	<input type="text"/>		
Trading Name:	<input type="text"/>		
<input type="checkbox"/> Company	<input type="checkbox"/> Close Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other legal entity - Please specify: <input type="text"/>
Contact Persons:	<input type="text"/>		
Entity's Registration Number:	<input type="text"/>		
Are you a Registered Taxpayer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, specify income tax number: <input type="text"/>
VAT Registration Number:	<input type="text"/>		
Country of Entity's Registration:	<input type="text"/>		
Principle Business Activities:	<input type="text"/>		
Physical Business Address:	<input type="text"/>		Code: <input type="text"/>
Postal Address:	<input type="text"/>		Code: <input type="text"/>
Contact Details	Telephone Number: <input type="text"/>	E-Mail Address: <input type="text"/>	
Source of Funds (compulsory):	<input type="text"/>		



**NAMIBIA ASSET MANAGEMENT**

— Our expertise. Your advantage. —

**B**

## ACTING ON BEHALF OF AN INVESTOR\*/JOINT NAME REGISTRATION\*\*

\*e.g. Persons with Power of Attorney. \*\*Insert second name if joint name registration.

Title:  Surname:

First Name(s):

ID or Passport Number (if foreign national):

Date of Birth:  Namibian Resident: ☐ Yes ☐ No

Postal Address:  Code:

Residential Address:  Code:

Telephone (Home):  Telephone (Work):

Fax Number:  Cellphone Number:

Email Address:  Capacity:

Occupation:  Employer:

Are you a registered tax payer of the United States of America? ☐ Yes ☐ No If yes, please provide this tax/GIN reference number:

Are you a politically exposed person or a prominent influential person\*? ☐ Yes ☐ No

Additional authorised representatives and joint signatories - Complete Annexure A

**GOTO  
ANNEXURE A**



**C**

## INVESTMENT OPTIONS

I/We hereby apply to invest in the NUTM collective investment schemes in accordance with the provisions of the relevant Deed of each fund at the respective fund/s price/s ruling on the date of receipt of the monies by NUTM, subject to receipt of a duly completed Application Form, proof of transfer and all relevant supporting documentation.

		<b>Lump Sum Investment</b> (Min. N\$5 000 p.m.) (Min. N\$10 000 for Money Market Fund)	<b>Debit Order</b> (Minimum N\$500 p.m)	<b>Annual Debit Order Increase</b> (Enter Percentage)	<b>Income Distribution Reinvested</b>	<b>OR</b>	<b>Income Distribution Deposited to Bank Account</b>
<b>NEED</b>							
<b>LOCAL SPECIALIST FUND</b>							
NAM Coronation Money Market Fund	Income	N\$	N/A	N/A	<input type="checkbox"/>	or	<input type="checkbox"/>
<b>LOCAL FLAGSHIP FUNDS</b>							
NAM Coronation Strategic Income Fund	Income	N\$	N\$	%	<input type="checkbox"/>	or	<input type="checkbox"/>
NAM Coronation Balanced Defensive Fund	Income & growth	N\$	N\$	%	<input type="checkbox"/>	or	<input type="checkbox"/>
NAM Coronation Capital Plus Fund	Income & growth	N\$	N\$	%	<input type="checkbox"/>	or	<input type="checkbox"/>
NAM Coronation Balanced Plus Fund	Growth multi-asset	N\$	N\$	%	<input type="checkbox"/>	or	<input type="checkbox"/>
<b>OFFSHORE FLAGSHIP FUND (NAD-denominated feeder fund)</b>							
NAM Coronation Optimum Growth Fund	Growth multi-asset	N\$	N/A	N/A	<input type="checkbox"/>	or	<input type="checkbox"/>

### REGULAR DEBIT ORDER AUTHORITY

I/We the undersigned, authorise Namibia Unit Trust Managers to draw against my/our bank account the debit order investment amounts in terms of this application on the

☐ 2nd ☐ 26th day of each month for the investment at the ruling price on that day commencing on (date):

All such withdrawals from my/our account will be treated as though they have been signed by me/us personally, and I/we request the bank to debit my/our account with these amounts. I/We acknowledge that debit order investments are subject to a 30 day clearance period. I/We agree that this debit instruction is irrevocable and irreversible and hereby indemnify NUTM against any loss or damage it may suffer or incur should the recurring debit order either be reversed or not be honoured for any reason whatsoever.



## D

## METHOD OF PAYMENT

- Electronic/Internet transfer ☐ Electronic internet transfers may take up to 2 days to appear in our bank account. Units may only be priced upon confirmed receipt of documentation and funds into the relevant Unit Trust bank account. Please insert the investor's initials and surname in the reference section on the proof of transfer in order to assist NUTM with processing the applications.
- Electronic collection by NUTM ☐ Electronic collection by NUTM is restricted to a maximum of N\$250 000 per debit. Where a higher amount than this is requested, multiple debits will be processed on the same day. Funds are deducted from the investor's bank account 4 days after the receipt of a valid and complete application form and supporting documentation.
- Regular debit order ☐ Please complete the Debit Order Authority section if you select this option.

DOWNLOAD DEBIT  
ORDER AUTHORITY

Please note that no cash deposits will be accepted. Any such deposits will be returned net of any related bank charges.

NUTM requires proof of transfer together with receipt of the applicable documentation as set out in this form, before this application can be processed.

<b>NAM Coronation Strategic Income Fund</b> Account Holder: NAM Coronation Strategic Income Fund Bank: Nedbank Namibia Branch: Windhoek Branch Code: 461-617 Account Number: 1199 000 3620	<b>NAM Coronation Capital Plus Fund</b> Account Holder: NAM Coronation Capital Plus Fund Bank: Nedbank Namibia Branch: Windhoek Branch Code: 461-617 Account Number: 1199 000 3671	<b>NAM Coronation Balanced Defensive Fund</b> Account Holder: NAM Coronation Balanced Defensive Fund Bank: Nedbank Namibia Branch: Windhoek Branch Code: 461-617 Account Number: 1199 000 3728	<b>NAM Coronation Balanced Plus Fund</b> Account Holder: NAM Coronation Balanced Plus Fund Bank: Nedbank Namibia Branch: Windhoek Branch Code: 461-617 Account Number: 1199 000 3582	<b>NAM Coronation Money Market Fund</b> Account Holder: NAM Coronation Money Market Fund Bank: Nedbank Namibia Branch: Windhoek Branch Code: 461-617 Account Number: 1199 001 5688
<b>NAM Coronation Optimum Growth Fund</b> Account Holder: NAM Coronation Optimum Growth Fund Bank: Nedbank Namibia Branch: Windhoek Branch Code: 461-617 Account Number: 1199 032 9895				

## E

## BANKING DETAILS

The details specified below must be in the investor's name and will be used for all future banking transactions until such time we are notified of any changes in writing.

Name of Account Holder:	<input type="text"/>		
Name of Bank:	<input type="text"/>	Branch Name:	<input type="text"/>
Branch Code:	<input type="text"/>	Account Number:	<input type="text"/>
Type of Account:	<input type="checkbox"/> Current	<input type="checkbox"/> Transmission	<input type="checkbox"/> Savings

A recent bank confirmation letter or bank statement must accompany this application form as confirmation of proof of bank details. No payments will be made to third parties (i.e. payments will only be made to the bank account in the name of the registered investor.) We are unable to facilitate payments to credit cards or market-linked accounts. All payment instructions are executed electronically.

**F REGULAR WITHDRAWAL METHODS**Selected monetary value per withdrawal N\$ Selected withdrawal frequency: ☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Yearly

Selected first withdrawal month: payable up to two business days thereafter.

The minimum regular withdrawal is N\$500 per month per fund.

**FROM FUND**

Fund Name	Value of Regular Withdrawal	% Per Fund
NAM Coronation Money Market	N\$ or	%
NAM Coronation Strategic Income Fund	N\$ or	%
NAM Coronation Balanced Defensive Fund	N\$ or	%
NAM Coronation Capital Plus Fund	N\$ or	%
NAM Coronation Balanced Plus Fund	N\$ or	%
NAM Coronation Optimum Growth Fund	N\$ or	%
<b>Total amount to be withdrawn per period</b>	N\$ or	%

Withdrawals will be paid into your bank account within 2-5 business days after the selected date of regular withdrawal. If the withdrawal date falls on a weekend or public holiday, the withdrawal will be processed on the next business day.

**G AUTHORISED SIGNATORIES**

The following individuals are authorised to sign all instructions sent on behalf of the investor:

Full Name	Contact Number	Email Address	Signature

**Please indicate whether you require a joint signing authority by making an election below:**

- ☐ We instruct NUTM to only action instructions signed by all investors named above.
- ☐ We instruct NUTM to action instructions signed by any of the investors named in Sections A and B.
- ☐ Refer to the attached Authorised Signatory list.

NUTM will action instructions signed by any of the investors named above if no election is made.

We jointly and severally authorise NUTM to act upon instructions placed by any one investor on behalf of all joint investors subject to terms (a) to (e) below:

- (a) We authorise NUTM to act upon the instructions given in writing with regard to the units in the fund(s) that we have selected, signed or purportedly signed by any one of the signatories in Section A and B.
- (b) We confirm that these authorisations shall apply to any further units purchased, transferred or otherwise held by the entity.
- (c) We agree that this authorisation shall remain in force until notice signed by all the authorised representatives (e.g. directors) in writing of its termination or replacement is received by NUTM and any such notice shall be without prejudice to the completion of transactions already initiated by NUTM pursuant to the above terms.
- (d) We agree that this authorisation shall be construed in accordance with and governed by the laws of Namibia.
- (e) NUTM do not accept monies in cash either directly at the Manager or by a bank deposit, such monies will be returned to the originating source net of fees.

**H****COMMUNICATION FROM NAMIBIA ASSET MANAGEMENT**

Please send my investor statements by ☐ Email ☐ Post

Where no choice is made, all communication will be sent by email where an address is supplied, otherwise by post.

Our latest financial statements and fund fact sheets are uploaded to our website ([www.namasset.com.na](http://www.namasset.com.na)) and copies can be provided upon request.

**I****SUPPORTING DOCUMENTATION**

(Copies of the supporting documentation are sufficient as long as all texts and photographs are clear and legible.)

- The following outlines the supporting documentation required in terms of the Financial Intelligence Act No.13 of 2012 or as amended as well as other documents required by Namibia Unit Trust Managers (NUTM).
- If supporting documentation in terms of the Financial Intelligence Act No.13 of 2012 or as amended has been provided in full to another primary accountable institution (e.g. the Financial Advisor) and if NUTM has confirmed that such institution has provided written confirmation, the investor is not obliged to furnish NUTM with such supporting documentation. In this event we require only the proof of identity of the investor/authorised person, power of attorney (if applicable), and proof of bank details.

**PART 1****(a) Information to be specified in respect of every manager, close corporation member, partner and person authorised to transact on behalf of the entity (Additional representatives to complete Annexure A):**

- |                       |  |                       |
|-----------------------|--|-----------------------|
| • Person's full names | • Contact particulars                                      | • Residential address |
| • Date of birth       | • Identity number or passport number for foreign nationals | • Email address       |

**(b) Supporting documentation required in respect of every manager, close corporation member, partner and person authorised to transact on behalf of the entity:**

- ☐ Copy of ID document (Namibian residents)/valid passport (foreign nationals)

**(c) Supporting documentation required in respect of companies, close corporations, partnerships and other legal entities:**

- ☐ Proof of Namibian income tax number (e.g. any Inland issued document bearing name and tax number)
- ☐ Proof of VAT number (e.g. any Inland Revenue issued document bearing name and VAT number)
- ☐ Proof of registered address (e.g. registration documents)
- ☐ Proof of business address (e.g. bank statement, utility bill or telephone account less than three months old)
- ☐ Proof of trading name (e.g. copy of letterhead)
- ☐ Proof of banking details (e.g. bank statement or recent bank confirmation letter less than three months old)
- ☐ Shareholding structure

**(d) Additional supporting documentation required in respect of a company:**

- ☐ Copy of Certificate of Incorporation (CM1) bearing Registrar's stamp and a company secretary's signature
- ☐ or such other official document for foreign companies
- ☐ Copy of Notice of Registered Office and Postal Address (CM22)

**(e) Additional supporting documentation required in respect of a close corporation:**

- ☐ Founding Statement and Certificate of Incorporation (CC1) bearing Registrar's stamp and a company secretary's signature
- ☐ or such other official for foreign companies
- ☐ Amended Founding statement (CC2)

**(f) Additional supporting documentation required in respect of other legal entities:**

- ☐ Constitution or founding document
- ☐ List of beneficiaries

**I SUPPORTING DOCUMENTATION****PART 2****(a) Information to be specified in respect of every holder of 25% or more of the voting rights within the entity:****If such holder is a natural person:**

- |                       |  |
|-----------------------|--|
| • Person's full names | • Identity number or passport number for foreign nationals |
| • Date of birth       | • Residential address                                      |
| • Contact particulars |  |

**If such holder is a company:**

- |                                       |  |
|---------------------------------------|--|
| • Registered name                     | • Identity number or passport number for foreign nationals |
| • Registration number (if applicable) | • Business address   |
| • Trading name                        | • Contact name   |
| • Registered address                  | • Contact particulars                                      |

**(b) Supporting documentation required in respect of every holder of 25% or more of the voting rights within the entity:**

☐ **If natural person: Copy of ID document - Namibian residents; Passport - foreign nationals**

**If company (Namibia/foreign)/close corporation/partnership/other legal/trust:**

- ☐ Proof of business address (e.g. bank statement, utility bill or telephone account less than three months old)
- ☐ Proof of registered address (e.g. registration documents)
- ☐ Proof of trading name (e.g. copy of letterhead)

☐ **If company:** Copy of Certificate of Incorporation (CM1) and Copy of Notice of Registered Office and Postal Address (CM22)

☐ **If foreign company:** Copy of official document issued by an authority for recording the incorporation of companies

☐ **If close corporation:** Copy of Funding Statement, Certificate of Incorporation (CC1) and Amended Founding Statement (CC2)

☐ **If a partnership:** Copy of partnership agreement

☐ **If other legal entity:** Copy of constitution or founding document

☐ **If a trust:** Copy of trust deed and authority given by the Master of the High Court

**J GENERAL INFORMATION AND CONDITIONS****Capital Risk**

Unit prices will fluctuate relative to the market value of securities comprising the funds' portfolios and increase or decrease accordingly. Should any guarantee be furnished against price fluctuations this shall be by a party other than the manager with details and costs clearly defined.

**Redemptions**

Units will be repurchased by the administrator at the net asset value calculated in accordance with the requirements of the Unit Trust Control Act or as amended and the relevant Trust Deeds and paid to the unit holder within 2 business days of the written request, unless the disinvestment exceeds 5% of the total fund value in which case the provisions of the Deed dealing with payment in respect of repurchases will apply. If the units to be repurchased are subject to a pledge, written consent is necessary for the transaction. Redemption from the NAM Coronation Optimum Fund may take 2-5 business days of the written request to be paid to the unit holder account due to the trading cycle of the fund. Repurchase instructions which include a change in your banking details must be accompanied by a copy of a recent bank confirmation letter or bank statement less than 3 months old.

**Investor Communication**

A transaction advice will be sent to you once your investment has been processed. Statements will be issued on a quarterly basis. Our client service consultants are available during business hours on 061 275 700 (Monday to Friday from 08h00 to 17h00).

**Pricing and cut-off times**

Forward pricing occurs at 15h00 each business day and at 17h00 on the last business day of each month. Units will be purchased at the ruling net asset value price on the date of your deposit by NUTM. Completed application forms and notification of deposits must be received before 12h00 and 10h00 for Money Market instructions. Cut-off time also applies to redemptions and switches (unless the amount being disinvested exceeds 5% of the total fund value). All purchases, except for debit orders (30 days clearance period), are subject to a 14 day clearance period in respect of subsequent redemptions. Distributions on purchases within the 30 day clearance period will be automatically reinvested.

**Processing of Personal Information**

The Investor acknowledges that NUTM requires its personal information and that of its representatives and Authorised Signatories (collectively "Representative(s)"), in order for NUTM to perform its obligations fairly, competently, and in accordance with the law, with personal information ("PI"). The Investor acknowledges that a failure to provide complete and accurate PI, and/or any other information/documentation required in relation to the investment, to NUTM may lead to NUTM not being able to accept any investment from the Investor or the suspension, closure or inability to transact or make further contributions to the Investor's investment account. The Investor consents on its own behalf and on behalf of its Representative(s) (hereby warranting that it is authorised to provide such consent on behalf of its Representatives) to NUTM collecting, using, processing, storing, disclosing and verifying (collectively "process" or "processing") the PI, as well as any other information disclosed to NUTM in terms hereof and/or disclosed to NUTM for the duration of the investment, and for the purposes of, *inter alia*:

1. Generally administering, servicing and maintaining the Investor's investment account(s).
2. Communicating with the Investor and its Representative(s), agents or any other primary contact persons.
3. Providing the PI and any other information disclosed herein and/or disclosed to NUTM at any time during the period of the investment (collectively the "Information") to any entity within the NUTM group of companies, with which the Investor already has an existing relationship, or with which the Investor is about to enter into a relationship, for the efficient servicing/administration of the Investor's investments.
4. Providing the Information to third parties (which may include consumer credit bureaus and other similar service providers) that assist with the verification of the Investor's and/or a Representative's information or that assist in establishing and/or obtaining additional information regarding the Investor and a Representative as may be needed by NUTM to meet its regulatory obligations such as, but not limited to its regulatory obligations under the Financial Intelligence Act, 2012 (Act No. 13 of 2012) or as amended; or assist with the enforcement of agreements; or which store and/or maintain the Information; or which require the Information to process the Investor's instructions or to otherwise provide a service to the Investor for their investment, where such party has procedures in place to protect the Information.
5. Transferring the PI outside the borders of Namibia where the person receiving the PI is subject to and complies with similar data protection laws.
6. Providing the Information and any other information disclosed in this application or disclosed to NUTM at any time during the period of the investment to local and/or international regulatory authorities, law enforcement agencies and governmental departments, and any other person that NUTM is required, by law, to share the Information with.
7. Using the Information to conduct research or to service products. Where appropriate, the Information will be de-identified such that it cannot be linked back to Investor.
8. Using the Information to meet contractual/legal and/or regulatory obligations.

*NUTM will ensure that controls are in place to protect the PI and will process the PI as permitted by law. If the Investor or any of its Representatives in relation to their PI is of the view that NUTM has not done so, they will be entitled to contact NUTM and object.*

*The PI will be kept until such time as NUTM are legally compelled to delete/destroy it. The Investor, and any Representative in relation to their own PI, have the right to request a copy of the PI that NUTM holds and a right to request the correction thereof. It is the Investor's responsibility to inform NUTM of any changes to the PI.*

*Where you are acting in a representative capacity on behalf of an investor, all acknowledgements, agreements and consents contained herein are given by you on behalf of the investor and you warrant your authority to act in such a representative capacity.*



K

## FEES SCHEDULE

Fund name	Initial fee	Annual Management Fee	Performance Fee
NAM Coronation Money Market Fund	0.00%	0.50%	None
NAM Coronation Strategic Income Fund	0.00%	0.85%	None
NAM Coronation Balanced Defensive Fund	0.00%	1.25%	None
NAM Coronation Capital Plus Fund	0.00%	1.25%	None
NAM Coronation Balanced Plus Fund	0.00%	1.25%	None
NAM Coronation Optimum Growth Fund	0.00%	1.10%*	None

\* Includes a 0.6% annual management fee paid to the underlying fund

L

## INVESTMENT ADVISORY RELATIONSHIP

☐

I acknowledge that I did not receive financial advice from either the NUTM or a financial advisor; OR

☐

I acknowledge that I have received financial advice from a financial advisor, please complete Annexure B.

GO TO  
ANNEXURE B



M

## DECLARATION BY INVESTOR

I/We understand and agree to be bound by the provisions of this application form. If on the date of signature of this application form an updated application form exists and the fees are different on that form, the fees on the updated application form will apply.

I/We understand and/or confirm that:

- The information contained herein is correct and that, if this application form is signed in a representative capacity, I/we have the necessary authority to do so and that this transaction is within my/our powers.
- I/We am/are acting for my/our own account and that I/we have made my/our decisions to enter into the investment and as to whether the investment is appropriate for me/us independently based upon my/our own judgement, upon advice from such advisors as I/we may deem necessary. I/We declare that I am/we are not relying on any communication from NUTM whether written, oral or implied as investment advice or as a recommendation to enter into the investment. I/We understand that information and explanations relating to the terms of an investment shall not be considered investment advice or a recommendation to enter into the investment.
- NUTM will only be able to process investments on receipts of funds into the appropriate bank account, proof of deposit, and all relevant documentation.
- NUTM will not be responsible for any failure, malfunction or delay of any networks, electronic or mechanical device or any other form of communication used in the submission, acceptance and processing of applications and/or transactions. NUTM will not be liable to make good or compensate any investor or third party for any damages, losses, claims or expenses resulting therefrom.
- I/We understand the NUTM Fee Schedule which details the unit trust funds and fee information.
- I/We indemnify NUTM accordingly.
- I/We will notify NUTM immediately if my/our tax residency or Foreign Account Tax Compliance Act ('FATCA') or equivalent classification changes in the future, or if there are any changes in circumstances that may impact on my/our tax residency status and/or FATCA classification.
- I/We agree that Namibia Asset Management and/or Namibia Unit Trust Managers may share information about my/our tax residency status regarding this investment with the Internal Revenue Service (IRS) of the United States of America as required by FATCA.
- I/We have read the general information and conditions contained in section J and agree thereto.

Click in the  
Signature  
Box for  
instructions

SIGN THIS FORM  
WITH DIGITAL ID



1st Applicant:	<input type="text"/>	Signature:	<input type="text"/>	Date:	<input type="text"/>
2nd Applicant:	<input type="text"/>	Signature:	<input type="text"/>	Date:	<input type="text"/>
3rd Applicant:	<input type="text"/>	Signature:	<input type="text"/>	Date:	<input type="text"/>
4th Applicant:	<input type="text"/>	Signature:	<input type="text"/>	Date:	<input type="text"/>





## A

## ANNEXURE A

## ADDITIONAL AUTHORISED REPRESENTATIVES

To be completed by persons authorised to transact on behalf of the entity.

e.g. Persons with Power of Attorney.

Title:	<input type="text"/>	Surname:	<input type="text"/>		
First Name(s):	<input type="text"/>				
ID or Passport Number (if foreign national):	<input type="text"/>			Please attach a copy of your ID or Passport	
Date of Birth:	<input type="text"/>	<input type="text"/>	Namibian Resident:	<input type="checkbox"/> Yes <input type="checkbox"/>	Gender: <input type="checkbox"/> M <input type="checkbox"/>
Postal Address:	<input type="text"/>				Code: <input type="text"/>
Residential Address:	<input type="text"/>				Code: <input type="text"/>
Telephone (Home):	<input type="text"/>		Telephone (Work):	<input type="text"/>	
Fax Number:	<input type="text"/>		Cellphone Number:	<input type="text"/>	
Email Address:	<input type="text"/>		Capacity:	<input type="text"/>	
Occupation:	<input type="text"/>		Employer:	<input type="text"/>	
Are you or any director, member or beneficial owner registered tax payers of the United States of America?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please provide this tax/GIN reference number:			<input type="text"/>		
Are you a politically exposed person or a prominent influential person*?			<input type="checkbox"/> Yes <input type="checkbox"/> No		

\* An individual who has been entrusted with a prominent public function, for example Head of State, minister, senior judge, senior politician, military official or senior executive of a state-owned entity. You are also considered a politically exposed person if you are a family member or close associate of any of the above.

**B ANNEXURE B**  
**FINANCIAL ADVISOR DETAIL AND DECLARATION**Click in the  
Signature  
Box for  
instructions**SIGN THIS FORM  
WITH DIGITAL ID****To be completed by advisor**

Contact Name:	<input type="text"/>	Company:	<input type="text"/>
Advisor Account Number:	<input type="text"/>	Registration Number:	<input type="text"/>
NAMFISA License Number:	<input type="text"/>	Authorised Advisor Signature:	<input type="text"/>

An "Accountable Institution" includes but is not limited to the following list of institutions: a bank, long-term insurer or management company registered in terms of the Unit Trust Control Act or as amended or a person who carries on the business of rendering investment advice or investment brokering services including a public accountant who carries on such a business, a member of a stock exchange licensed under the Stock Exchanges Control Act 1985 or as amended and person who has been approved or who falls within a category or persons approved by the Register of Stock Exchanges or the Registrar of Financial Markets. If this section is completed by an "Accountable Institution" acting on behalf of the client, the supporting documentation on referred to in Section C need not to be submitted to NUTM\*, apart from a copy of the ID and proof of a bank details. NUTM may however still request this information where it is deemed necessary.

\*(a copy of ID and proof of bank account is still required)

I/We

- Declare that I/we am/are a licensed Financial Service Provider(s) and have made the disclosures required in terms of the Unit Trust Control Act 1981 or as amended and subordinate legislation thereto to the investor.
- Acknowledge and confirm that, in my/our capacity as the primary accountable institution with NUTM being the secondary accountable institution, I/we have established and verified the identity of the client in accordance with Section 13 of the Financial Intelligence Act No.13 of 2012 or as amended ("the Act"), and will keep records of such identification and verification according to the provisions of Section 15 of the Act.
- Warrant that I/we have explained all fees that relate to this investment to the investor and I/we understand and accept that the investor may withdraw his/her authority for payment to me/us in writing to NUTM.

Signed at:  on this  day of , year Signature of financial advisor: **FINANCIAL ADVICE FEES****To be completed by investor**

- ☐ I hereby confirm that I have received financial advice from the financial advisor listed in this section. I instruct NUTM to deduct the following advice fees to pay the advisor on my behalf.

Initial advice fee:  % (Negotiable to maximum 3%). Applied to each contribution and deducted before investment is made.

Annual advice fee:  % per annum of the market value of the investment portfolio, charged by way of unit reduction and paid to the Financial Advisor monthly in arrears. (Negotiable to maximum 1%). If initial advice fee of greater than 1.5% is selected, then the maximum annual advice fee is 0.5%. This annual advice fee is not part of the normal annual management fee charged by the relevant Fund/s. You may terminate or revise financial advice fees by written notice to us.

Signature of investor or authorised representative: Signature of investor or authorised representative: