

Useful information about your OPN Default Living Annuity Application Form



INVESTMENTS

When to use this form

This application form is only applicable to members of any of the OPN Retirement Funds who are retiring and wish to invest their retirement savings, or a portion thereof, into the OPN Default Living Annuity Solution.

Should you not wish to invest your retirement savings into the OPN Default Living Annuity Solution, please complete the "OPN Living Annuity Application Form".

Contact details

Email: admin@ppsinvestments.co.za

Tel: 0860 468 777 (0860 INV PPS)

Fax: 021 680 3680

Website: www.ppsinvestments.co.za

Cut off and timelines

- All complete and valid instructions received **before 14:00** on a business day will be processed on the **same day**.
- Complete and valid instructions received **after 14:00** will be processed on the **next business day**.
- Investments will be processed and finalised within a maximum of **five (5) business days**.
- Any errors are to be reported within **fourteen (14) days** of your new business confirmation being received.

Useful information

Please refer to our website www.ppsinvestments.co.za for:

- Product brochures and key benefits.
- Retirement Benefits Counselling brochure.
- PPS Balanced Fund of Funds Minimum Disclosure Documents.
- Financial Intelligence Centre Act (FICA) requirements.
- The Effective Annual Cost measure (EAC) is an industry-wide disclosure standard. It can be used by investors and financial advisers to compare charges on most retail investment products, and their impact on investment returns, so that investors are placed in a better position to make informed decisions around investment choices. The EAC is a measure of the charges that an investor will likely incur in purchasing and holding a financial product, and does not attempt to measure the features of a financial product.
- The latest Product Terms, Conditions and Declarations.
- You can manage your investment, view balances, transact and download tax certificates on the PPS Investments Secure OnlineServices website (www.ppsisecure.co.za) or the PPS for Professionals mobile app for IOS or Android.

Consider getting financial advice

PPS Investments does not provide financial advice. However, we believe in the merits of good financial advice. If you are not comfortable making your own investment decisions, consider using the services of a PPS Investments accredited financial adviser.

Document checklist and supporting documents

Please send through these documents with your application form to admin@ppsinvestments.co.za or fax 021 680 3680:

- A copy of your South African barcoded ID/smart card, valid passport (if foreign national), valid drivers license or birth certificate (if minor). A certified copy is required if you do not have a financial adviser.

Proof of your residential address, not older than three (3) months, (e.g. bank statement, utility bill or telephone account).

Retirement Option Form confirming your retirement request.

Kindly strike through all sections of the application form not completed or not applicable.

OPN DEFAULT LIVING ANNUITY APPLICATION FORM



INVESTMENTS

The OPN Living Annuity is a PPS Investments product issued under the life licence of Coronation Life Assurance Company Proprietary Limited ("Coronation Life") under the provisions of the Long-Term Insurance Act, No.52 of 1998 in the name of the policyholder.

A CONTACT PERSON FOR OUTSTANDING REQUIREMENTS

Name and surname

Telephone number

Email

Capacity

B PERSONAL DETAILS OF INVESTOR

Title Surname

First name(s)

Date of birth

Identity or passport number

Country of birth

Country where passport issued

Gender Male

Female

Nationality South African Other (Please specify)

Occupation

Tax number

Physical address

Postal code

Postal address

Postal code

Telephone number (home)

Telephone number (work)

Cellphone number

Fax

Email address
(Compulsory)

C ACTING ON BEHALF OF THE INVESTOR

C1. Legal guardian, parent, persons acting on behalf of investors. Proof to be sent to PPS Investments.

Title Surname

First name(s)

Identity or passport number

Relationship to Investor

C2. Mandate for dealing with the discretionary FSP acting on behalf of the investor. Please send us a copy of the signed mandate.

I have entered into a discretionary mandate with a FAIS category II FSP

Full

Limited

I authorise PPS Investments to accept instructions submitted by the FSP on my behalf.

Yes

No

Please send us a copy of the signed mandate.

D RETIREMENT FUND DETAILS

Which OPN Retirement Fund are you retiring from?

OPN Personal Pension Retirement Annuity Fund

OPN Preservation Pension Fund

OPN Preservation Provident Fund

Policy/Investor number

E BANK DETAILS FOR ANNUITANT (NO THIRD-PARTY PAYMENTS ARE ALLOWED)

The following bank details will be used for annuity payments. Any changes to your banking details must be forwarded in writing to PPS Investments together with proof thereof.

Account Holder name

Bank

Account number

Branch

Branch code

Type of account

Current

Savings

Transmission

F DEFAULT ANNUITY DETAILS

Please select a drawdown rate based on your age bracket. You can select a lower drawdown rate than what is stipulated in the table below.

I select the maximum drawdown rate as stipulated in the table below, within my age band.

I select a lower starting drawdown rate than stipulated below. % (please complete your selected drawdown percentage (not lower than 2.5%))

The maximum allowed starting drawdown rates:

Age band	Male	Female
55 - 59	3.00%	2.50%
60 - 64	3.00%	3.00%
65 - 69	3.00%	3.00%
70 - 74	3.50%	3.00%
75 - 79	4.00%	3.50%
80 - 84	4.00%	4.00%
85 and above	4.50%	4.50%

Disclosure for OPN Default Living Annuity Drawdown Table:

If these drawdown rates are too low, please speak to a financial adviser or seek financial advice. A financial adviser may be able to recommend a sustainable drawdown rate, which is suitable for you, through their ongoing advice and ability to oversee your investment. A financial adviser may also be able to tailor your living annuity solution to your personal circumstances and risk tolerance.

- The OPN Default Living Annuity Solution offers **monthly income payments** that will be made by the **28th** day of the respective month.
- If finalised on or before the **14th** of the month the annuity income will be paid at the end of that month. For investments finalised after the 14th of the month, annuity income will be paid at the end of the following month.
- The annuity Rand amount will be increased annually, on anniversary, by 5.7%. This increase targets fund's long-term view of inflation.
- No Investment Option choices will apply when you are invested in the OPN Default Living Annuity Solution, as the funds will automatically be invested in the default Investment Option, which is currently the **PPS Balanced Fund of Funds (A2)**.
- Deviation from the default Investment Option or an increase in drawdown that exceeds the allowable income levels within the OPN Default Living Annuity will lead to an exit from this solution.

Special Tax Rate

The income tax on your combined living annuity payments is calculated based on the current income tax tables, assuming that you have no other source of income. If you would like to specify an income tax rate for the tax period that is different to the one calculated using the income tax tables, please provide us with that rate.

Apply special tax rate of %

A South African Revenue Service (SARS) tax directive is required if the tax rate is lower than that calculated from the income tax tables. It will be required annually and the obligation to obtain tax directives rests with the policyholder.

G BENEFICIARY NOMINATIONS

You may nominate beneficiaries who may receive a benefit upon your death. If you elect to review and make changes to the nomination of any beneficiaries, a signed instruction must be received before your death. Beneficiary alterations received after your death will be treated as invalid. If no beneficiary is nominated, the proceeds may be payable to your estate subject to legislative requirements, this may have a negative impact on estate duty, executor fees and income tax payable on the death of the policyholder.

	Beneficiary 1	Beneficiary 2
Surname		
First name(s)		
Relationship		
ID / Passport number		
Contact number		
Postal address		
Percentage		

	Beneficiary 3	Beneficiary 4
Surname		
First name(s)		
Relationship		
ID / Passport number		
Contact number		
Postal address		
Percentage		

If there are additional beneficiaries, please attach this information on a separate signed page. Please ensure the percentages nominated total to 100%.

Should the PPS Beneficiaries Trust (IT 4876/01) be utilised when effecting payment to minors? Yes No

H COMPULSORY COMPLETION BY POLICYHOLDER

The signature of the policyholder's spouse is required if the policyholder is married in community of property and nominates a beneficiary other than the policyholder's spouse.

Are you married in community of property? Yes No

If yes, have you nominated a beneficiary other than your spouse? Yes No

If yes to all the above, you require your spouse's written consent.

Name of spouse

Signature of spouse

Date

I FINANCIAL ADVICE FEES

I acknowledge that I have received financial advice from the financial adviser whose details are completed in section K below. This is my appointed financial adviser and I agree to the payment of advice fees as follows:

Initial lump sum fee

Max. 1.5% (excl. VAT)

Ongoing fees per annum

Max. 1% (excl. VAT)

Should either of the above fee fields be left blank, fees will apply at 0.00% for the respective fields.

The Administrator will pay ongoing advice fees to your financial adviser on your behalf and will recover these fees from your investment. These fees will therefore accrue to the Administrator as an additional fee over and above the administration fee applicable to your investment in terms of PPS Investments' fee structure.

J CLIENT DECLARATION

I, _____, hereby confirm that:

- I have received Retirement Benefits Counselling as per Regulation 39 of the Pension Funds Act, and that I am fully aware of the implications of this option chosen.
- All information provided in this form and all other documents signed by me, whether in my handwriting or not, is correct
- I am responsible for the accuracy and completeness of all answers, statements or other information provided by me or on my behalf
- I will inform PPS Investments if any of the information supplied changes
- I have not received advice from PPS Investments or the Administrator

and I have read, understood and agreed to:

- The Product Terms, Conditions and Declarations which may change from time to time
- The Minimum Disclosure Documents (MDDs) of the chosen fund(s) including, but not limited to, the Total Expense Ratio (TER) and Transaction Cost (TC) applicable to my investment.
- The Effective Annual Cost disclosure available from my financial adviser, the PPS Investments website or from the Client Service Centre.

Signature of investor

Date

K FINANCIAL ADVICE DETAIL AND DECLARATION

Financial adviser name

Financial adviser institution

Financial adviser code

To ensure fair outcomes for investors, we (as the product supplier) are required to ensure appropriate sharing of responsibility between ourselves and you (the financial adviser). As such, we request that you provide the following assurance to us:

- I confirm that I have concluded the analysis necessary to provide appropriate advice (which is both suitable for the investor and takes into account their circumstances) with respect to the product suppliers products considered and selected.
- I declare that I am a licensed Financial Services Provider and have made the disclosures required in terms of the Collective Investment Schemes Control Act, No. 45 of 2002; the Financial Advisory and Intermediary Services Act, No. 37 of 2002; and all subordinate legislation to the investor.
- I confirm that I have met directly with the client or the person acting on behalf of the client recorded in this application, and confirm that he/she bears a likeness to the photograph on his/her identity document; and
- I have verified his/her identity with original acceptable documentation, copies of which are attached.
- I warrant that I have explained all fees to the investor, including but not limited to the Effective Annual Cost (EAC), that relate to this investment and I understand and accept that the investor may withdraw his / her authority for payment of advice fees in writing to PPS Investments.

Signature of financial adviser

Date

PPS Investments (Pty) Ltd, PPS Multi-Managers (Pty) Ltd, PPS Investment Administrators (Pty) Ltd and PPS Insurance Company Ltd are licensed financial services providers.
PPS Management Company (RF) (Pty) Ltd is a licensed collective investment scheme manager.

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