Useful information about your PPS Default Living Annuity Application Form



When to use this form

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

Should you not wish to invest your retirement savings into the PPS Default Living Annuity Solution, please complete the "PPS 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 Benefit 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 Online Services 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.

PPS DEFAULT LIVING ANNUITY APPLICATION FORM



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

A CONTA	ACT PERSON FOR O	UTSTANDING REQUIRE	MENTS		
Name and surna	me				
Telephone numb	per	Email			
Capacity					
B PERSO	NAL DETAILS OF IN	IVESTOR			
Title	Surname				
First name(s)					
Date of birth		Identity or pass	port number		
Country of birth		Country where p	assport issued		
Gender	Male	Female			
Nationality	South African	Other (Please specify)			
Tax number		N	Member number		
Occupation Physical address					
				Postal code	
Postal address					
				Postal code	
Telephone numb	per (home)		Telephone number (work)	Postal code	
Cellphone number			Fax		
Email address (Compulsory)					
	G ON BEHALF OF TI	HE INVESTOR			
			of to be sent to PPS Investments.		
Title	Surname				
First name(s)					
Identity or passp	ort number		Relationship to Investor		
C2. Mandate fo	r dealing with the discre	etionary FSP acting on behalf o	of the investor. Please send us a co	py of the signed mandate.	
I have entered in	to a discretionary manda	Full	Limited		
I authorise PPS I	nvestments to accept inst	Yes	No		

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Please send us a copy of the signed mandate.

D RETIREMENT FUND DETAILS

Which PPS Retirement Fund are you retiring from?

PPS Retirement Annuity PPS Personal Pension Retirement Annuity Fund

PPS Preservation Pension Fund PPS 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

Type of account Current Savings Transmission

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 PPS 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 PPS 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 PPS Investments' long-term view of inflation.
- No Investment Option choices will apply when you are invested in the PPS 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 PPS 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 NOMINATIO You may nominate beneficiaries who may r		eath If you elect to re	aview and make changes t	o the nomination of any
beneficiaries, a signed instruction must be beneficiary is nominated, the proceeds may executor fees and income tax payable on the	received before your death. E	Beneficiary alterations	received after your death	will be treated as invalid. If no
	В	eneficiary 1		Beneficiary 2
Surname				
First name(s)				
Relationship				
ID / Passport number				
Contact number				
Postal address				
Percentage				
	1 -	· · ·		D C: 4
	В	eneficiary 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 s	separate signed page.	Please ensure the percen	tages nominated total to 100%.
Should the PPS Beneficiaries Trust (IT 4876)	01) be utilised when effectin	g payment to minors?	? Yes No	
H COMPULSORY COMPLETIC	N BY POLICYHOLDER			
The signature of the policyholder's spou other than the policyholder's spouse.	se is required if the policyh	older is married in c	ommunity of property a	nd nominates a beneficiary
Are you married in community of property?		Yes	No	
If yes, have you nominated a beneficiary ot	Yes	No		
If yes to all the above, you require your spo	use'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 Ongoing fees per annum

Max. 1.5% (excl. VAT) 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.

CLIENT DECLARATION

, 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 the
- 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.

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;
 In the case of Customised Solutions, the Minimum Disclosure Document of the underlying funds can be obtained from the respective Managers;
 The Effective Annual Cost disclosure available from my financial adviser, the PPS Investments website or from the Client Service Centre.

	The Effective Annual Cost disclosure available from thy maintain adviser, the FFS investments website of from the effective centre.					
O	pportunity to share in profits					
pa	If you're not already a holder of a PPS provider product, the Accidental Death product opens your door to a PPS Profit-Share Account into which you'll be paid a portion of our profits from your investments with us. With the Accidental Death product, a tax-free cash lump sum of up to R2 000 000 could be payable to your beneficiaries in the event of your accidental death. Ask your financial adviser for more information on this product or request information directly by ticking the box below.					
	I do not have a financial adviser and would like to receive an application form and explanatory brochure directly.					
Si	gnature of investor					
	Date					
k	FINANCIAL ADVICE DETAIL AND DECLARATION					
Fi	nancial adviser name					
Fi	nancial adviser institution					
Fi	nancial adviser code					
To (th	ensure fair outcomes for investors, we (as the product supplier) are required to ensure appropriate sharing of responsibility between ourselves and you le 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						
Г						
	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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