## 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.pps.co.za/invest

#### **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 business days**.
- · Any errors are to be reported within fourteen 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:

Proof of deposit.

If unit transfer – copy of current investment statement indicating Investment Option(s) and fund classes.

Should the bank account holder be a third party, we require proof of bank details (e.g. bank statement) not older than three (3) months clearly displaying the account holder's name and the bank's logo. Collection from a third party legal entity account requires a letter from the bank listing the authorised signatories of the account along with copies of their ID documents and 3 specimen signatures.

#### Please note : We may request additional documents after validating your application.

#### The Ombud for Financial Services

Kasteelpark, Orange Building, 2nd Floor 546 Jochemus Street, Erasmuskloof, Pretoria

PO Box 74571 Lynwood Ridge 0040

Telephone: Facsimile: E-mail: Website: +27 12 762 5000 / +27 12 492 9711 / 0860 066 3274 +27 86 546 5694 / +27 12 348 3447 info@faisombud.co.za www.faisombud.co.za

# **PPS DEFAULT LIVING ANNUITY APPLICATION FORM**



PROFESSIONAL PROVIDENT SOCIETY INVESTMENTS PROPRIETARY LIMITED ("PPS INVESTMENTS") CLIENT SERVICE CENTRE CONTACT DETAILS EMAIL: admin@ppsinvestments.co.za

FAX: 021 680 3680 WEBSITE: <u>www.pps.co.za/invest</u>

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 CONTACT PERSON FOR OUTSTANDING REQUIREMENTS

Name and	surname
Telephone	number

Email

Capacity

PERSONAI	L DETAILS OF IN	IVESTOR			
:	Surname				
name(s)					
of birth		Identity or pas	sport number		
try of birth		Country where	passport issued		
er	Male	Female			
nality	South African	Other (Please specify)			
umber			Member number		
				Postal code	
address					
				Postal code	
lephone number (home) Telephone number (work)					
none number	ne number Fax				
ACTING O	N BEHALF OF TH	HE INVESTOR			
egal guardian,	parent, persons acti	ing on behalf of investors. Pr	oof to be sent to PPS Investme	nts.	
	Surname				
ame(s)					
ty or passport n	umber		Relationship to Investor		
andate for dea	ling with the discre	etionary FSP acting on behalf	of the investor. Please send us	a copy of the signed mandate.	
entered into a	discretionary manda	te with a FAIS category II FSP.		Full	Limited
orise PPS Invest	ments to accept inst	ructions submitted by the FSP	on my behalf.	Yes	No
	hame(s) of birth try of birth er nality umber bation cal address address address hone number address pulsory) ACTING O egal guardian, hame(s) ty or passport n andate for dea entered into a	Surname   name(s)   of birth   try of birth   er   Male   nality   South African   umber   bation   cation   cation   catal address   address address pulsory) ACTING ON BEHALF OF TI egal guardian, parent, persons action surname ame(s) ty or passport number andate for dealing with the discretionary manda	name(s) of birth Identity or pass try of birth Country where er Male Female nality South African Other (Please specify) umber bation al address address address address pulsory) ACTING ON BEHALF OF THE INVESTOR agarguardian, parent, persons acting on behalf of investors. Pr Surname ame(s) ty or passport number andate for dealing with the discretionary FSP acting on behalf entered into a discretionary mandate with a FAIS category II FSP.	Surname         name(s)         of birth       Identity or passport number         try of birth       Country where passport issued         er       Male       Female         nality       South African       Other (Please specify)         umber       Member number         patients       Fax         address       Sumame         pulsory)       Fax         patients       Sumame         pulsory)       Relationship to Investor         sumame       Sumame         pulsory)       Sumame         pulsory)       Sumame         pulsory)       Sumame         pulsory </td <td>Surname   aame(s)   of birth   Identity or passport number   try of birth   Country where passport issued   er   Male   Female   nality   South African   Other (Please specify)   umber   umber   Member number   postal code   address   address   one number (home)   Telephone number (work)   one number (home)   Fax   address   Attine OF THE INVESTOR   reading guardian, parent, persons acting on behalf of investors. Proof to be sent to PPS Investments.   Surname   ame(s)   ty or passport number   Relationship to Investor   readed for dealing with the discretionary FSP acting on behalf of the investor. Please send us a copy of the signed mandate.   entered into a discretionary mandate with a FAIS category II FSP.</td>	Surname   aame(s)   of birth   Identity or passport number   try of birth   Country where passport issued   er   Male   Female   nality   South African   Other (Please specify)   umber   umber   Member number   postal code   address   address   one number (home)   Telephone number (work)   one number (home)   Fax   address   Attine OF THE INVESTOR   reading guardian, parent, persons acting on behalf of investors. Proof to be sent to PPS Investments.   Surname   ame(s)   ty or passport number   Relationship to Investor   readed for dealing with the discretionary FSP acting on behalf of the investor. Please send us a copy of the signed mandate.   entered into a discretionary mandate with a FAIS category II FSP.

Please send us a copy of the signed mandate.

#### **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)

Please complete the bank account details which relate to this instruction.

Please note: Payments are made electronically and we will not make any payments to credit cards, market-linked accounts or third party bank accounts.

Account Holder Name Account number Bank Branch code Branch Type of account

Current Savings

**DEFAULT ANNUITY DETAILS** F

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.

Transmission

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 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.

Signature of spouse		Date
Name of spouse		
If yes to all the above, you require your spouse's written consent.		
If yes, have you nominated a beneficiary other than your spouse?	Yes	No
Are you married in community of property?	Yes	No

#### 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.

#### MARKETING CONSENT

PPS operates under the ethos of mutuality and all PPS' profits are allocated to PPS members with qualifying products on an annual basis by way of allo-cations to their PPS Profit-Share Accounts. It is in your best interest, as a member, to be informed of changes that could benefit you. In order to comply with the requirements of POPI Act and respect your choices, PPS Group requires your consent to contact you regarding new products and services which may be beneficial to you, including promotions and research.

Give my consent

Do not give my consent

Please note: You will still receive communication regarding changes or enhancements to any existing products that you may have with us.

#### **CLIENT DECLARATION**

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, hereby confirm that:

- 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

- Under penalties of perjury, I declare that I have examined the information completed on this form and to the best of my knowledge believe it is true, correct, and complete.
- Developments ("OECD") and Common Reporting Standard ("CRS") is correct and that unless stated otherwise, I am not a tax resident of the United States of America.
- I understand and acknowledge that where I have signed electronically and not used one of the PPS Group approved electronic signature method(s),
- PPS Investments may exercise additional verification(s) for my safety and security. PPS Investments may accept instructions submitted and signed by me in electronic format, which shall be considered as an original signature for all intents and purposes and shall be enforceable as set out in the Electronic Communications and Transactions Act of 2002 ('ECTA'). I acknowledge and accept any and all liability which may arise in connection with choosing to sign any application form(s) by electronic means.

#### and I have read, understood and agreed to:

- The <u>Product Terms, Conditions and Declarations</u> 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. Appropriate financial services can only be provided after full disclosure of my relevant personal information for purposes of opening and adminis-tering my financial products and products and services that I apply for; PPS Group will keep me informed about improvements and/or changes to my current products and services; and
- PPS Group may process my personal information for purposes of efficient client servicing and providing products and services to me.

#### **Opportunity to share in profits**

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.

Date

#### Signature of investor

#### M FINANCIAL ADVICE DETAIL AND DECLARATION

Financial adviser name

Financial adviser institution

Financial adviser code

FSP number

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.

#### Consent to collect personal information from the FSCA

- To provide you with our services, we may be required to collect information from the FSCA.
- We will at all times process the Personal Information solely upon instructions and for the purposes defined. We will not in any way further process the Personal Information except where the further processing is compatible with the original purpose in terms of applicable law.
- I consent to the request and collection of my Personal Information by PPS Investments from the FSCA to confirm that I am able to provide advice and intermediary services on the applicable product and its underlying investment options.

Date

Signature of financial adviser



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.

> PPS House, Boundary Terraces, 1 Mariendahl Lane, Newlands, 7700 Website: <u>www.pps.co.za/invest</u> Email: clientservices@ppsinvestments.co.za