

Useful information about your PPS Investment Account Application Form



Contact details

Email: admin@ppsinvestments.co.za
Tel: 0860 468 777 (0860 INV PPS)
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**.
- On a weekend or public holiday, we will start processing on the next business day only.
- 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.pps.co.za/invest for:

- Product brochures and key benefits.
- Fund fact sheets (Minimum Disclosure Documents) for each of the available Investment Option(s).
- 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 Providers

If you are not satisfied with the response from PPS Investments or the Administrator or if you have a complaint about the advice given by your financial adviser, you have the right to address your complaint in writing to the Ombud for Financial Services Providers.

The Ombud for Financial Services
Kasteelpark, Orange Building,
2nd Floor
546 Jochemus Street,
Erasmuskloof,
Pretoria
0010

PO Box 41
Menlyn Park
0063

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

The Ombud is legally empowered to investigate and adjudicate complaints in a procedurally fair, economical and expeditious manner.

PPS INVESTMENT ACCOUNT APPLICATION FORM



A CONTACT PERSON FOR OUTSTANDING REQUIREMENTS

Name and surname

Telephone number

Email

Capacity

B PERSONALISED INVESTMENT NAME

You have the opportunity to name your investment (e.g. "My Holiday Fund").

Name my investment

Please note that the product does not guarantee performance in line with your personalised investment name.

C 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

Member number

Physical address

Postal code

Postal address

Postal code

Telephone number (home)

Telephone number (work)

Cellphone number

Fax

Email address
(Compulsory)

D TAX INFORMATION

Tax Regulations require us to collect information about each investor's tax residency. In certain circumstances we may be obliged to share information on your account with SARS. Should any information provided change in the future, please ensure you advise us of the changes promptly.

Depending on where you are a resident for tax purposes, PPS Investments may be required to deduct Dividend Withholding Tax (DWT) and/or Interest Withholding Tax (IWT) on your behalf.

Natural Persons

I am a South African resident for tax purposes and understand that:

- A default DWT rate of 20% will apply on local dividends.
- Dividends declared by a Real Estate Investment Trust (REIT) are regarded as taxable income and are subject to tax at the applicable rate, such dividends will however be exempt from dividend tax.
- IWT will not apply.

South African Tax Number as provided by SARS

I am a non-South African resident for tax purposes and understand that:

- A default DWT rate of 20% will apply except if a reduced rate is applicable.
- A default IWT rate of 15% will apply except if a reduced rate is applicable.
- Dividends declared by a Real Estate Investment Trust (REIT) are exempt from South African Income Tax but will be subject to DWT.

Country of residence for tax purposes

Tax Identification (TIN) Number provided to you by your tax authority

Effective date of tax residency

As a non-South African resident you may qualify for a reduced rate if there is a Double Taxation Agreement (DTA) in place between South Africa and your country of residence. By declaring a country of residence for tax purposes other than South Africa, you declare you are not a South African resident and that the reduced rate and article number as contained in the Withholding Tax Annexure (available on www.pps.co.za/invest) applies to your investment.

Are you a tax resident anywhere else? If so, please complete the table below:

| Country/Countries of Tax Residence | Tax Identification Number (TIN) |
|------------------------------------|---------------------------------|
| | |
| | |
| | |
| | |

If you are unable to provide a Tax Identification Number, please select one of the reasons below:

My tax authority does not require me to provide a TIN/FE (does not apply to South African or United States tax residents).

My country does not issue TIN/FE to its tax residents (does not apply to South African or United States tax residents).

I am unable to obtain a TIN/FE (please provide a reason).

Are you a "US Person"?

Do you have a United States tax number, residency or citizenship? Yes No

If PPS Investments identifies, through the information provided on this application form, that you are considered a US person or have a Reportable Account, from any other country you may be required to submit further documents.

E ACTING ON BEHALF OF THE INVESTOR

E1. Legal Guardian, parent, persons acting on behalf of the investor. Proof to be sent to PPS Investments.

Title Surname

First name(s)

Identity or passport number Relationship to investor

E2. 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.

F LUMP SUM INVESTMENT DETAILS

We do not accept any cash into our bank accounts.

Lump sum contribution (minimum R2 000) Date of deposit/transfer

Please indicate the method of payment below:

Unit transfer from another investment platform (Please complete Section G)

Electronic/internet transfers – Electronic transfers may take a few days to appear in the product's bank account.

Electronic collection by the Administrator – Electronic collection is restricted to a maximum of R1,000,000 per debit. An amount greater than this will require the Administrator to make multiple debits, which may result in additional transaction costs. The investment will be processed **one (1) business** day after the last debit is received. The reference on your bank account will be a combination of the abbreviated product name (PPS INV1) and a 12-digit client number e.g. PPS INV1 123456789012.

Please do the electronic collection on or as soon as possible thereafter.

Source of funds for this investment (compulsory)

Salary Savings Business Gift/inheritance Other

Phasing-in details

Lump sum investments can be made directly into the Investment Option(s) of your choice or can be phased in over a period of time. If this option is selected, all monies will be invested in the PPS Enhanced Yield Fund and will be phased into your selected Investment Option(s). Your investment will not be phased in unless specified below.

Please phase-in my investment over 3 months 6 months 12 months

Phase-ins will be generated on the **9th of the month**, and priced on the **10th**. Should either of these days fall on a weekend or public holiday, the process will take place on the **following business day**.

G UNIT TRANSFER OF EXISTING INVESTMENT OPTION(S)

Only complete this section if you are doing a unit transfer from another fund.

Please provide us with a statement from the current investment platform / MANCO and confirmation of which unit trusts are to be transferred.

Name of investment company Investment number

Transfer 100% of my holdings

OR if a **partial** transfer please specify the holdings to be transferred below:

| Investment reference number | Investment Option | Class | Number of units |
|-----------------------------|-------------------|-------|-----------------|
| | | | |
| | | | |
| | | | |
| | | | |

Switch to Investment Option(s) specified in Section "L"

H DEBIT ORDER INVESTMENT DETAILS

Debit order investment amount
(minimum R500)

Commencement month

| | | | | | |
|-------------------------|--|--|---|---|------------------------------|
| Collection date | <input type="checkbox"/> 1 st | <input type="checkbox"/> 7 th | <input type="checkbox"/> 15 th | <input type="checkbox"/> 28 th | |
| Frequency | <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Half-yearly | <input type="checkbox"/> Yearly | |
| Annual increase* | <input type="checkbox"/> 0% | <input type="checkbox"/> 5% | <input type="checkbox"/> 10% | <input type="checkbox"/> 15% | <input type="checkbox"/> 20% |

Consider escalating your debit order amount annually in order to ensure your contributions are in line with inflation.

If not specified, debit order collection will be monthly on the first.

If cut-off for your specific collection date is missed, the debit order will commence on the same day of the following month.

The reference on your bank account will be a combination of the abbreviated product name (PPS INV1) and a 16- digit investment number e.g. PPS INV1 POL1234567890123.

I BANK ACCOUNT DETAILS FOR DEBIT ORDERS/ONCE OFF COLLECTIONS

The following bank details will be used for the debit order/collection that applies to this instruction.

Should you wish to update your bank account details on other investments, please complete the Personal Details Amendment Form.

Account holder name

Bank Account number

Branch Branch code

Type of account Account holder ID number/Trust number/Company registration number

Current Savings Transmission

Source of funds for this investment (compulsory)

Salary Savings Business Gift/Inheritance Other

Please note additional documents may be required

- If the bank account holder is a third party individual, we require a copy of their ID documents with 3 specimen signatures.
- If bank account holder is a third party legal entity, we require a letter from the bank listing the authorised signatories of the bank account along with copies of their ID documents with 3 specimen signatures.

I, the undersigned, request and authorise PPS Investments to debit the bank account specified above.

**Signature of bank account holder/
Authorised person for third
party legal entity**

Date

J REGULAR WITHDRAWAL

Regular withdrawal amount

Frequency of regular withdrawal Monthly Quarterly Half-yearly Yearly

Regular withdrawal payments will be made by the **28th day of the respective month**.

First payment to be made on the 28th of

Regular withdrawals will be paid proportionally from all Investment Option(s) unless a specific Investment Option(s) are indicated below:

| Investment Option (Please complete full Investment Option Name and Class) | Regular withdrawal amount/Percentage |
|---|--------------------------------------|
| | |
| | |
| | |
| | |
| Total | 100% |

K BANK ACCOUNT DETAILS FOR FUTURE PAYMENTS/REGULAR WITHDRAWALS

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 loan accounts, credit cards, market-linked accounts or third-party bank accounts.

For future payments and regular withdrawals, please use the same bank account details as for debit orders.

For future payments and regular withdrawals, please use the bank account details stipulated below:

Account Holder Name

Bank

Account number

Branch

Branch code

Type of account

Current

Savings

Transmission

L INVESTMENT OPTION(S)

For a comprehensive list of available Investment Option(s), please refer to the Investment Option Schedule available on www.pps.co.za/invest or from the PPS Investments Client Service Centre.

Please ensure that the percentages completed in the debit order investment and lump sum investment column total 100%.

| Investment Option (complete full Investment Option name and class) | Lump sum investment % | Debit order investment % |
|--|-----------------------|--------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| TOTAL | 100% | 100% |

M FINANCIAL ADVICE FEES

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

Initial lump sum fee

Max. 3% (excl. VAT)

Initial debit order fee

Max. 3% (excl. VAT)

Ongoing fees per annum

Max. 1% (excl. VAT)

Fees will be paid proportionately from all Investments Option(s) unless a specific Investment Option is indicated below:

A specific Investment Option

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.

N 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 allocations 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.

O CLIENT DECLARATION

I, _____, 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.
- I certify that the information provided in terms of Foreign Accounts Tax Compliance Act ("FATCA"), the Organisation for Economic Co-operation and 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.

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.
- 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 administering 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.
- 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.

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

P FINANCIAL ADVISER 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

Contact us

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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