1. Important Information

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| **1.1** | **Hollard Investments is a division of Hollard Life Assurance Company Limited and Hollard Investment Managers.** |
| **1.2** | **Global Fund Administrators (Pty) Ltd (GFA) ('The Administrator') is the administrator of this investment.** |
| **1.3** | **Global Nominees (Pty) Ltd is an independent company approved by the Financial Services Board that holds assets for the investor's exclusive benefit.** |
| **1.4** | Hollard cares about your privacy. In order to provide you with our service, we and our service provider have to process the personal information you provide us with by completing this form. We will treat this information with caution and we have put reasonable security measures in place to protect it. |
| **1.5** | **This application will only be processed when all investment requirements are met, once monies reflect in the Global Nominees bank account and subject to the relevant Terms and Conditions and applicable legislation.** |
| **1.6** | **For an additional contribution into your Investment Account, an Effective Annual Cost (EAC) Disclosure must be requested from our Customer Care team on 0860 202 202 or** customercare@hollardinvestments.co.za**. The EAC Disclosure number must be inserted in the appropriate sections of this form and the disclosure document attached to this instruction.** |
| **1.7** | **If you are requesting a unit transfer please ensure that:**  * + 1. The administrator from which you wish to transfer allows for this.     2. The underlying investment portfolios you select and their class are available from Hollard Investments at the time of the transfer. If not, you must switch to an available investment portfolio and class before the transfer is completed. Please arrange this with your current administrator prior to the transfer. |
| **1.8** | **All documents can be sent via email to** customercare@hollardinvestments.co.za **or faxed to +27(0)11 351 3816.** |
| **1.9** | **The daily cut-off for receipt of instructions is 14h00.** |
| **1.10** | **Any instructions received on a public holiday or over a weekend will be processed at the next available working day.** |

1. Document Checklist

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|  | Completed additional contribution form. |
|  | For a model portfolio investment, a completed Investment Manager Client Mandate. The Client Mandate is available from your Financial Advisor. |
|  | An EAC Disclosure document. This can be obtained from the Hollard Investment Customer Care team on 0860 202 202. |
|  | Proof of banking details (for debit order instructions) if not previously provided (cancelled cheque or bank statement, not older than 3 months). |
|  | Proof of deposit of funds/transfer to the Global Nominees bank account. |

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|  | For a transfer, a recent statement of your investment from the transferring administrator. |
|  | Updated Customer Due Diligence (CDD)/FICA documents as per the CDD requirements list available on the Hollard website [www.hollard.co.za](http://www.hollard.co.za) |

1. Investor Details

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| **3.1** | Investment Number: |  |
| **Investor Name:** |  |

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| **3.2** | **Contact Details:** | | | |
| Tel: |  | Mobile: |  |
| **\***Email: |  | | |
| Please indicate if these are new contact details?  Yes | | | |

1. Investment Details

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| **4.1** | The minimum recurring debit order amount is **R500 per month.** | | | | | | | | |
| **4.2** | Please note, **debit orders are restricted to a maximum of R1 000 000 per debit.** | | | | | | | | |
| **4.3** | **Source of Funds:** | | | | | | | | |
|  | Bonus  Savings  Inheritance  Salary  Other: | | | | |  | | | |
| **4.4** | **An Effective Annual Cost (EAC) Disclosure must be requested from our Customer Care team on 0860 202 202 or** customercare@hollardinvestments.co.za**. The EAC Disclosure number must be inserted below and the disclosure document attached to this instruction form.** | | | | | | | | |
| **EAC Disclosure Number:** | |  | | | | | | |
| **4.5** | **Investments Method:** | |  | | | | | | |
| **Once-off Investments** | | **Investment Amount:** | | **R** | | | | |
| **Recurring Debit Order** | | **Debit Order Amount:** | | **R** | | | | |
| **Transfer** | | **Estimated Transfer Amount:** | | **R** | | | | |
| **Once-off Investments** | | **Is this a Unit Transfer?** | | **Yes** | | | | |
| **4.6** | **Transfer Details:** | | | | | | | | |
| In the event of multiple transfers, amounts will be invested as and when they are received by the Administrator, provided all requirements have been met. | | | | | | | | |
|  | **Registered Name of Administrator** | | | | | **Investment Number** | | |
| **Transfer 1** |  | | | | |  | | |
| **Transfer 2:** |  | | | | |  | | |
| **4.7** | **Investment Allocation:** Please see the latest portfolio list to confirm your selection of investment portfolios. The portfolio list is available on our website at [www.hollard.co.za](http://www.hollard.co.za). | | | | | | | | |
| **4.8** | **Income and Expense Account:** You can choose to have your annual administration fee, Financial Advisor annual fee and your regular withdrawal deducted from a nominated income and expense account, designated as the Hollard Prime Money Market Fund. | | | | | | | | |
| Do you require an income and expense account? | | | **Yes** | | | | | |
| If Yes, please ensure to select the Hollard Prime Money Market Fund as one of your underlying investment portfolios. | | | | | | | | |
| **4.9** | **Investment Portfolio/ Model Portfolio Choice:**  If you are investing in a model portfolio, please provide the model portfolio name in the table below (and not the names of the investment portfolios in which the model portfolio invests). You may invest into one or a combination of investment portfolios and/or model portfolios. | | | | | | | | |
|  | | | | | | | | |
| **Investment Portfolio Name/Model Portfolio Name** | | | | | | | **Once-off Investment %** | **Recurring Debit Order %** |
|  | | | | | | | **%** | **%** |
|  | | | | | | | **%** | **%** |
|  | | | | | | | **%** | **%** |
|  | | | | | | | **%** | **%** |
|  | | | | | | | **%** | **%** |
|  | | | | | | | | **100%** | **100%** |

1. Recurring Debit Order Details

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| Hollard Investments must receive this instruction **5 days prior** to the debit order date. Please supply proof of bank account details for the bank account provided. | | | | | | | | |
|  | | | | | | | | |
| Please debit my account monthly on:  1st **OR**  20th Commencing Date: | | | | | |  | | (dd/mm/yy) |
| If you would like to increase your recurring contribution automatically each year, please select from the options below. Please note that debit order escalations take place one year after your first debit order. | | | | | | | | |
| Percentage Increase Per Annum:  5%  10%  15%  20% | | | | | | | | |
| **Banking Details:** | | | | | | | | |
| Account Holder: |  | | | | | | | |
| Bank Name: |  | | | Account Number: | | |  | |
| Branch Name: |  | | | Code: | | |  | |
| **Account Type:** | Transmission | Cheque/Current | Savings | | Other | |  | |
|  | | | | | | | | |
| FICA documents are required for the bank account holder, should the bank account holder be a party other than the Investor. Please refer to the FICA Requirements list for details. | | | | | | | | |
| **The bank account holder hereby authorises Global Nominee to draw direct debits against the bank account detailed above.** | | | | | | | | |

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| **Signature:** | | | |
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| 1st Account Holder Signature: |  | 2nd Holder  Signature: |  |
| Official Capacity: |  | Official Capacity: |  |

1. Financial Services Provider Details and Declaration

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| Practice Name (FSP): |  | | FSP Number: |  |
| Financial Advisor Name: |  | | Financial Advisor Code: |  |
|  | | | | |
| **Please select an initial fee that will apply to this instruction:** | | | | |
| Initial Fee for lump sum: | **%** | **Excl. VAT** | | |
| Initial Fee for Debit Order: | **%** | **Excl. VAT** | | |
| **A maximum of 3.0% (excl. VAT) will be deducted prior to the investment being made. If a fee is not specified, a zero initial fee will apply.** | | | | |

1. Investor Declaration and Signature

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| --- | --- |
| **7.1** | I confirm that all information provided in this form is correct. |
| **7.2** | I have not received advice from Hollard Investments and/or the administrator in respect of this application. |
| **7.3** | I understand and accept all risks associated with this investment. In addition, I confirm that I have read and understood all relevant documentation associated with this investment. |
| **7.4** | I confirm that I am the legal owner of the monies which are to be utilised to facilitate this investment or have gained the signed permission of the third party bank account holder as included in this application. |
| **7.5** | I confirm that none of the investments to be managed / transferred is from the proceeds of any unlawful activity, or is in contravention of the Prevention of Organised Crime Act 121 of 1998 and the Financial Intelligence Centre Act 38 of 2001. I further declare that all approvals have been granted and that the required notifications have been made in respect of the abovementioned extracts of legislation. |
| **7.6** | Hollard Investments and/or the administrator reserve the right to request any additional evidence to identify the source of this investment. |
| **7.7** | I have read and understood the Hollard Investment Plan Information Document. This is available from your Financial Services Provider, the Hollard Investments Client Service Centre or on our web site at www.hollard.co.za. |

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| Signed at |  | | | | | on this |  | | | day of |  | | |
| **(Place)** | | | | | | **(Day)** | | | | **(Month & Year)** | | | |
| **Transferor:** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Signature: | |  | | | **Signature:** | | |  | | | | | |
| Official Capacity: | | |  |  | **Official Capacity:** | | | |  | | |  |  |

**\* If the applicant is under the age of 18, this signature must be that of the Person Acting on Behalf of the Investor.**