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** | This switch instruction will only be processed once all investment requirements are met and all required documents are received and subject to the relevant terms and conditions and applicable legislation. |
| **1.3** | All documents can be sent via email to [**customercare@hollardinvestments.co.za**](mailto:customercare@hollardinvestments.co.za) or faxed to +27(0)11 351 3816. |
| **1.4** | The daily cut-off for receipt of instructions is **12h00** and instructions will be processed on the second working day thereafter provided all requirements have been met. |

1. Document Checklist 

|  |  |
| --- | --- |
|  | Completed switch and rebalance instruction form. |
|  | For model portfolio investment, a Hollard Investment Managers Client Mandate must be completed. The Client Mandate is available from your Financial Advisor. |
|  | Completed Investor Declaration (see the last section of this form) should you choose to invest into one or more Qualified Investor Hedge Funds. |

1. Policyholder Details

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Policyholder Name: | |  | | | | | | |
| **Contact Details:** | | | | | | | | |
| Telephone: |  | | Fax: |  | | | \*Email: |  |
| Please indicate if these are new contact details? | | | | | Yes | No | | |

1. Switch Instruction Details

|  |  |  |  |
| --- | --- | --- | --- |
| **4.1** | Please note: Switch instructions are subject to the liquidity of the underlying assets. | | |
| **4.2** | You may complete a switch instruction for a maximum of five policies using this form provided the switch instruction for each policy is the same and there are common investment portfolios across each policy. If a different switch instruction is required for each policy a separate switch form will be required for each policy. | | |
| **4.3** | Switches are not permitted between policies. | | |
| **4.4** | Please refer to the latest Hollard Linked Endowment Investment Portfolio List for the list of investment portfolios options. This is available on the Hollard website or from your Financial Advisor. Please take note of the investment minimum requirements for personal share portfolios. | | |
| **4.5** | Please indicate the Hollard Linked Endowment Investment Portfolio List version number used when selecting your investment portfolios: | | |
|  | Portfolio list version number: |  |  |
| **4.6** | Should you be invested in a model portfolio, you may not switch between investment portfolios within the model portfolios. You may switch between model portfolios and/or other Investment Portfolios available for selection. | | |
| **4.7** | Please note that should you switch from a model portfolio in full, this will constitute an automatic termination of your discretionary client mandate with Hollard Investment Managers, unless you are still invested in another model portfolio managed by Hollard Investment Managers. | | |

1. Expense Account

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| You can choose to have your annual administration fee and Financial Advisor annual fee deducted from a nominated expense account, designated as the Hollard Prime Money Market Fund. |
| **Do you require an Expense account?**  Yes (If yes, please select the Hollard Prime Money Market Fund as one of your underlying investment portfolios). |
| If the expense account does not have sufficient funds at the time that annual fees are deducted, annual fees will be deducted proportionally from the remaining investment portfolios in the investment account. |

1. Investment Portfolio Switch

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **If you wish to switch specific investment portfolio(s) into new investment portfolio(s) please complete this section.** | | | | |
| **6.1** | Please note: Should you request to switch an amount in excess of 90% of the rand value of your investment portfolio, a percentage of units switch will be processed equivalent to the rand amount requested. For example if the switch rand amount equates to 92% of your investment portfolio, 92% of the unit balance will be switched. In these instances, depending on the confirmed unit price for the investment portfolio/s the switch amount may be greater or smaller than was originally requested. | | | |
| **6.2** | If you are switching to or from 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 be invested in one or a combination of investment portfolios and/or model portfolios. | | | |
| **6.3** | Please indicate the policy numbers that this switch instruction must be applied to (If multiple polices are selected, there must be common investment portfolios across each policy and only a percentage switch is permitted in this instance): | | | |
|  | 1st Policy No.: |  | 2nd Policy No.: |  |
|  | 3rd Policy No.: |  | 4th Policy No.: |  |
|  | 5th Policy No.: |  |  |  |
|  |  | | | |
|  | **SWITH FROM** | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Investment Portfolio Name/Model Portfolio Name** |  | **Investment Portfolio Code\*** | | | |  | **Investment %** | **OR** | **Rands** | |
|  |  |  | | | |  | **%** | **OR** | **R** | |
|  |  |  | | | |  | **%** | **OR** | **R** | |
|  |  |  | | | |  | **%** | **OR** | **R** | |
|  |  |  | | | |  | **%** | **OR** | **R** | |
|  |  |  | | | |  | **%** | **OR** | **R** | |
|  |  | **Total** | | | | | |  | **R** | |
| **\*Mandatory Field. This code can be found on the investment portfolio list available on the Hollard website.** | | | | | | | | | | |
|  | | | | | | | | | | |
| **SWITCH TO:** | | | | | | | | | | |
| **Investment Portfolio Name/Model Portfolio Name** | | |  | | **Investment Portfolio Code\*** | | | |  | **Investment %** |
|  | | | |  |  | | | |  | **%** |
|  | | | |  |  | | | |  | **%** |
|  | | | |  |  | | | |  | **%** |
|  | | | |  |  | | | |  | **%** |
|  | | | |  |  | | | |  | **%** |
| **Total** | | | | | | | | |  | **100%** |
| **\*Mandatory Field. This code can be found on the investment portfolio list available on the Hollard website.** | | | | | | | | | | |

1. Investment Portfolio Rebalance

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| **7.1** | **If you wish to rebalance your policy please complete this section.** | | | |
| **7.2** | Please indicate the policy numbers that this rebalance instruction must be applied to (If multiple polices are selected, there must be common investment portfolios across each policy): | | | |
| **7.3** | Please complete the table below with the target portfolio allocation percentage. The administrator will rebalance your policy to the specified allocation by buying and selling the required units. | | | |
|  | 1st Policy No.: |  | 2nd Policy No.: |  |
|  | 3rd Policy No.: |  | 4th Policy No.: |  |
|  | 5th Policy No.: |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| **Investment Portfolio Name/Model Portfolio Name** |  | | **Investment Portfolio Code\*** |  | **Investment %** |
|  | |  |  |  | **%** |
|  | |  |  |  | **%** |
|  | |  |  |  | **%** |
|  | |  |  |  | **%** |
|  | |  |  |  | **%** |
|  | | | |  | **100%** |
| **\*Mandatory Field. This code can be found on the investment portfolio list available from your Financial Advisor** | | | | | |

1. Debit Order Instruction

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| --- | --- | --- | --- | --- |
| **8.1** | Please indicate how you would like your debit order to be treated after the switch. If no election is made, the debit order will continue into the current portfolio selection for the policy numbers provided above. | | | |
|  |  | | | |
|  | **Debit order instruction to remain unchanged for policy numbers as specified below:** | | | |
|  | 1st Policy No.: |  | 2nd Policy No.: |  |
|  | 3rd Policy No.: |  | 4th Policy No.: |  |
|  | 5th Policy No.: |  |  |  |
|  | | | | |
|  | **Debit order to be amended to invest into the investment portfolio/s you have chosen to switch into, with the same percentage allocation as the switch for policy numbers as listed below. Please note: Debit order investments are not available for hedge funds and personal share portfolios**: | | | |
|  | 1st Policy No.: |  | 2nd Policy No.: |  |
|  | 3rd Policy No.: |  | 4th Policy No.: |  |
|  | 5th Policy No.: |  |  |  |
|  | | | | |
| **8.2** | Should you wish to cancel or change your existing debit order, please complete the Hollard Linked Endowment Change of Details Instruction Form? A request to cancel a debit order must be received 5 working days prior to the debit order run date. | | | |

1. Policyholder Declaration

|  |  |
| --- | --- |
| **8.1** | I/We confirm that all information provided in this form is correct |
| **8.2** | I/We have not received advice from Hollard Investments in respect of this instruction. |
| **8.3** | I/We understand and accept all risks associated with this investment. In addition, I/we confirm that I/we have read and understood all relevant documentation associated with this investment and I/we fully understand the financial risks associated herewith. |

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

|  |  |  |  |
| --- | --- | --- | --- |
| Policyholder Signature: |  | | |
| Official Capacity: | |  |

1. Qualified Investor hedge Fund Declaration

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| --- | --- | --- |
| **10.1** | The South African Hedge Fund industry is now subject to legislation which regulates the Funds under the Collective Investment Schemes (CIS) Act. The regulations are intended to provide a greater level of protection and certainty for investors. The legislation allows for two categories of Hedge. Funds: A Retail Investor Hedge Fund, and a Qualified Investor Hedge Fund. Each Hedge Fund is registered as one of these categories. | |
| **10.2** | A Retail Investor Hedge Fund is intended to be marketed to a broader retail market. As such these funds are subject to more stringent legislation regarding transacting frequency, levels of leverage, underlying investment instruments and risk management, amongst other things. | |
| **10.3** | A Qualified Investor Hedge Fund is intended for a more technically astute investor and is subject to less stringent limitations. Qualified Investors or their Financial Advisors should have demonstrable knowledge and experience which enables them to assess the merits and risks of a Qualified Hedge Fund investment | |
| **10.4** | You have chosen to invest into one or more Qualified Investor Hedge Funds within your Hollard Linked Endowment Policy, and we therefore require that you complete the below declaration. | |
|  |  | |
|  |  | I/We confirm that I/We am aware that I/We am investing into one or more Qualified Investor Hedge Funds within my Hollard Linked Endowment Policy. |
|  |  | I/We confirm that my/our appointed financial advisor has demonstrable knowledge and experience to advise me/us regarding the merits and risks of a Qualified Investor Hedge fund investment. My financial advisor has explained this investment to me/us. I/We confirm that I/We understand the nature and risks of the investment I/We am making. I/We acknowledge the inherent risk associated with the selected Hedge Fund(s) and understand that there are no performance guarantees. |
|  |  | **OR** |
|  |  | I/We confirm that I/We have the required demonstrable knowledge and experience in financial and investment matters to assess and select this investment in a Qualified Investor Hedge Fund. I/We confirm that I/We understand the nature and risks of the investment I am making. I/We acknowledge the inherent risk associated with the selected Hedge Fund(s) and understand that there are no performance guarantees. |

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

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