

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** | Hollard cares about your privacy. In order to provide you with our service, we and our service providers 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. |
| **1.3** | This application will only be processed when all investment requirements are met, once monies reflect in the Funds bank account and subject to the relevant Rules of the Fund and applicable legislation. |
| **1.4** | The Prime Retirement Annuity Fund is administered by Global Fund Administrators. |
| **1.5** | For an additional contribution (either via a lump sum or debit order) 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. |
| **1.6** | If you are requesting a unit transfer please ensure that:   1. The Rules of the transferring Fund allow 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 into an available investment portfolio and class before the transfer is completed. Please arrange this with your current Fund prior to the transfer. |
| **1.7** | All documents can be sent via email to customercare@hollardinvestments.co.za or faxed to +27(0)11 351 3816. |
| **1.8** | The daily cut-off for receipt of instructions is **14h00.** |
| **1.9** | 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. |
|  | An EAC Disclosure document. This can be obtained from the Hollard Investment Customer Care team on 0860 202 202. |
|  | For a model portfolio investment a completed Client Mandate must be provided. The Client Mandate is available from your Financial Advisor. |
|  | Proof of banking details if not previously provided and if a debit order investment is requested (cancelled cheque/bank statement, not older than 3 months). |
|  | Proof of deposit of funds/transfer to the Funds bank account. |
|  | For a transfer, a recent statement of your investment from the transferring administrator. |



1. Member Details

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| Investment Number: | |  | | | |
| Investment Name: | |  | | | |
| **Contact Details:** | | | | | |
| **Home:** |  | | | **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 R1 000 000 per debit.** | | | | | | |
| **4.3** | 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 for and the disclosure document attached to this instruction form. | | | | | | |
| **EAC Disclosure Number:** | | |  | | | |
| **4.4** | **Investment Method:** | | | | | | |
| Once-Off Investment | | | | Investment Amount: | **R** | |
| Recurring Debit Order | | | | Debit Order: | **R** | |
| Transfer | | | | Estimated Transfer Amount: | **R** | |
| Is this a Unit Transfer? | | | | Yes | | |
| If transfer was selected, which means was the transfer initiated?   1. A transfer from a Retirement Annuity Fund or Preservation Fund 2. A transfer due to pension interest in a divorce order 3. A transfer from an employer Fund | | | | | | |
| Last date of employment: | |  | | | | |
| **4.5** | **Transferring Fund 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 Fund** | | | | | **Membership Number** |
| **Transfer 1** |  | | | | |  |
| **Transfer 2** |  | | | | |  |
| **Transfer 3** |  | | | | |  |

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| **4.6** | **Investment Allocation:**   1. Please see the latest portfolio list to confirm your selection of investment portfolios. The portfolio list is available on our website [www.hollard.co.za](http://www.hollard.co.za). 2. Regulation 28 of the Pension Funds Act 24 of 1956, as amended, specifies maximum limits with regards to the different asset classes that a Retirement Fund investment may be exposed to. The investment portfolios which have been made available for selection within the Hollard Retirement Annuity Plan comply with these limits. | | | |
| **4.7** | **Expense Account:**  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 ensure to 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. | | | |
| **4.8** | **Investment/Model Portfolio Choice:**   1. Please enter your selected portfolio in the table below. 2. 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 in one or a combination of investment portfolios and/or model portfolios. | | | |
| **Investment/Model Portfolio Name** | | **Once-off Investment %** | **Recurring Debit order %** |
|  | | **%** | **%** |
|  | | **%** | **%** |
|  | | **%** | **%** |
|  | | **%** | **%** |
|  | | **%** | **%** |
|  | | **%** | **%** |
| **Total** | | **100%** | **100%** |

1. Payment Details for Once-off Investments

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| **5.1** | Once-off debit requests cannot be accommodated. |
| **5.2** | No cash deposits will be accepted. |
| **5.3** | Cheque deposits, electronic transfers and internet transfers should be made to the bank account below. |
| **5.4** | If Hollard Investments does not receive a completed application form and required documentation within 10 days from the date the monies are received by the Fund, Hollard Investments will return the deposited monies to the source bank account. |

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| **5.5** | Please use your **identity number as a payment reference** to assist in the timeous processing of this instruction. | | | |
| **Prime Retirement Annuity Fund Banking Details:** | | | |
| **Bank Name:** | Standard Bank | **Branch Code:** | 00 02 05 |
| **Account Holder:** | Prime Retirement Annuity Hollard | **Branch Name:** | Johannesburg |
| **Account Type:** | Business Current Account | **Account Number:** | 000 002 228 705 1 |

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 on the: | | | **1st** | | | **OR** | | **20th** of the month, commencing on the: | | | | | | | | | |  | | |
| **Debit Order Escalation** | | | | | | | | | | | | | | | | | | | | |
| 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:** | | | | | | | | | | | | | | | | | | | | |
| Bank Name: |  | | | | | | | | Branch Name: | | |  | | | | | | | Code: |  |
| Account Name: | |  | | | | | | | Account Number: | | | | | |  | | | | | |
| **Account Type**: | | Transmission | | | Cheque/Current | | | | | | Savings | | | | | Other: | |  | | |
| Bank Account Holder Signature: | | | |  | | | | | | | | | | | | |  | | | |
| Date: | | | |  | | | | | | | | | |  | | |  | | | |

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. If a fee is not specified, a zero-initial fee will be applied**. | | | | | |
| Initial Fee for lump sum: | | **%** | Excl. VAT (Financial Advisor Initial Fee may not exceed 3.0% excl. VAT) | | |
| Initial Fee for debit order: | | **%** | Excl. VAT (Financial Advisor Initial Fee may not exceed 3.0% excl. VAT) | | |

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| Financial Advisor Signature: |  |  | Investor Signature: |  | |
| Date: |  | Date: | |  |  |

1. Member Declaration

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| **8.1** | I confirm that all information provided in this form is correct. |
| **8.2** | I have not received advice from Hollard Investments in respect of this application. |
| **8.3** | 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. |
| **8.4** | I have read and understood the Hollard Retirement Annuity 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)** | | |
| Signature: | |  | | | | | | |
| Official Capacity: | |  |  | | | | |  |

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