

living annuity ad hoc application form

Please complete all sections in full using block letters. Note that all applications cannot be processed without proof of deposit. Indicate all options selected by means of an X.

Investor name Investor number

Investment strategy

pension investment details

contribution R (minimum R 6 000)

Registered name of transferor fund

Please specify whether the contribution came from a retirement annuity pension fund Living annuity provident fund

Please note that money transferred from a pension or provident fund cannot be added to money transferred from a retirement annuity fund and vice versa – these must be invested under different investor numbers (an entirely new application form is required).

Date of deposit/transfer (yyyymmdd)

Please make all cheques payable to SIS living annuity. Direct deposits are payable into the following bank account:

Account name: SIS living annuity Bank: First National Bank Branch: Cape Town Corporate
Branch code: 204109 Account no: 6210 711 5653

pension payment details

The additional annuity will be based on the initially elected income percentage and can be updated at the revision/anniversary date only.

financial planner declaration

I confirm that:

- I have established and verified the identity and residential address of the client/investor and, where applicable, the person acting on behalf of the client/investor in accordance with the requirements of the Financial Intelligence Centre Act (Act 38 of 2001), and the regulations thereto.
- I have made the disclosures into rule 4.1 and 4.2 of the Policyholder Protection Rules (Long-Term Insurance), which are required to be made by me to the applicant herein.

Name of financial planner

Financial planner signature

Signed at on this day of

investor declaration

I/We confirm that I/we have read and understood the relevant SIS strategy profile(s) related to my/our investment.
I/We confirm that I/we have read and understood the terms, conditions and declaration contained herein and in the initial application form.
I/We understand and accept that the terms, conditions and declaration in the initial application form will apply to this investment

Investor signature

Signed at on this day of

Please specify the initial fees for this investment in the total block below. Annual fees may not be adjusted as part of this transaction – the annual fees specified on the original application form will apply.

for acsis office use only		to be completed by FP	
	Administration %	Financial planner %	Total %
Initial fee	<input type="text"/>	<input type="text"/>	<input type="text"/>