

Old Mutual International Contact Details:

Email: ominternationalservice@omwealth.co.za Website: www.omi-int.com

Index: Section & Subject

Old Mutual International Investment Portfolio+

Funds Only Application

Individual Investor

February 2024

Existing Investment Portfolio/Investment Portfolio+ number (If applicable):

Financial adviser's details

Adviser name	A APPLICANT & EMPLOYMENT DETAILS
	B BENEFICIARY NOMINATION
Company name	C CURRENT WEALTH, SOURCE OF FUNDS &
E-mail	BANKING DETAILS
OMLAC(SA) code (if applicable)	D CONTRACT INFORMATION & INVESTMENT CHOICES
OMI Adviser code	E CHARGES & APPOINTING A MODEL PORTFOLIC
0	MANAGER
Contact person	F DECLARATION & SIGNATURE(S) – APPLICANT(S
Contact number	G DATA PRIVACY NOTICES
FAIS licence number	H DECLARATION & FINANCIAL ADVISER SIGNATURE
Offshore Specialist	I SUPPORTING DOCUMENTATION REQUIRED

Old Mutual Isle of Man only accepts business introduced by intermediaries which have Terms of Business with us.

All introducers must be appropriately FAIS licensed.

The Old Mutual International Investment Portfolio+ (IP+) is a Capital Redemption Contract issued as long-term insurance business under the Isle of Man Insurance Act 2008 by Old Mutual Isle of Man Branch of Old Mutual Life Assurance Company (South Africa) Limited, ("Old Mutual Isle of Man"). This Application Form should be read in conjunction with the IP+ Brochure, IP+ Fund List & the IP+ General Conditions.

Please note the following:

- The minimum Applicant(s)/Contract Holder(s) age is 18 and the maximum age is 89 years old. The maximum number of Applicants/Contract Holders is six.
- Details of any amendments following completion and signing of the application must be supported by an e-mail from the applicant(s) or their adviser with the applicant(s) included as an addressee confirming the changes. If the changes are significant, additional verification documentation may be requested.
- Any incomplete information will need to be confirmed in writing. For Model Portfolios please attach a signed copy of the mandate between the Discretionary Investment Manager and the applicant(s).

Please refer to section G for our Data Privacy notices. Further details on Tax, Cancellation Rights & the Complaints resolution process & Isle of Man Financial Services Ombudsman can be found in the Investment Portfolio+ General Conditions or on the Old Mutual International (OMI) website – <u>www.omi-int.com</u>

OLDMUTUAL

INTERNATIONAL



Applicant 1

Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss	\bigcirc	Other						
Full forename(s)														
Full surname(s)														
Previous name(s) or alias(s) (eg., maiden name)														
Gender (√)	\bigcirc	Male Female												
E-mail address (mandatory)														
Marital Status	\bigcirc	Divo	rced	() м	arried	\bigcirc	Single	\circ	Wide	owed	\bigcirc	Lega	lly sep	arated
Date of birth	D	D	Μ	М	Y	Y	Y	Y						
Country of birth														
Nationality														
Dual Nationality (if applicable)														
SA ID number														
Passport number (if no SA ID number)														
Stand/Plot/Erf number														
Current Residential Address (Where you currently live. This address must														
match the address given in the document to verify residential address.)	Postcode													
Country where currently residing														
Permanent Residential Address (Required if you are temporarily residing outside of South Africa, state address details of your														
permanent residence)	Post	code												
Country of permanent residence														
Mobile number														
Another Contact number (optional)														
Poscon for Invoctment	\bigcirc	Dive	rsifica	ntion o	fasse	ts	🔵 Sa	ving	for the	e futu	re	\bigcirc	Savir	ng for retirement
Reason for Investment		Esta	te plai	nning				her:						

Politically Exposed Persons (PEP)

PEP (Politically Exposed Person); i.e. a person who holds or has held high political office, or is or has been employed in a prominent public capacity, or the applicant is closely related to or associated with such a person. If the applicant(s), or any other party connected to this application either now or in the past/future, could be classed as a PEP, or connected with a PEP, please provide details.

Applicant 1 () Yes ()	No
Reason for PEP status	

Please note that Old Mutual Isle of Man will need further documentary evidence on the origin of wealth to support applications from parties who are, or are connected to PEPs.



A Applicant Employment Details (Continued)

Employment Details (refer to the tables below and complete the options available in the applicable text boxes)

Applicant 1		
Employment Status (√)	\square	Employed Self-Employed Retired Unemployed
	$\left \bigcup \right $	Never been employed
Occupation (incl previous Occupation if Retired or Unemployed)		
If Employed (Name of employer or your company name)		
If Self-employed (Trading As name)		
Name of employer or name of your own company or employer name prior to retirement/unemployment		
Address of employer or your own company – also applicable if Retired or Unemployed		
	Pos	stcode
Country		
Date of retirement/Date of unemployment (If applicable)	D	D M M Y Y Y Y
Industry or Nature of Business: (incl previous Industry if Re	etired o	or Unemployed)
Administrative and Support service Agriculture/Forestry and Fishing		Animals & Conservation Arms Manufacturers Art/Antique/Jewelry Dealer
○ Arts/Entertainment	\bigcirc	Construction and Cryptocurrency Assets Design & Architecture
C Education/Healthcare C Energy & Solar and Social work	\bigcirc	Financial, Insurance and Banking Gambling Industry (Casino, slot machines, betting) Hospitality
Imports/Exports Information/ Communication, Media and Technology	\bigcirc	Manufacturing (Import/ O Manufacturing (Non-Import/Export) O Marketing/Advertising
Mining: Extraction of precious metals and minerals Motor trade/dealership	\bigcirc	Private Military Contractors Professional Services Public Sector: Defence and Safety
Public Sector: Procurement, Infrastructure and Administration Real Estate: Development, Sales and/or Letting	\bigcirc	Regulated/Registered C Science and C Science and C Scrap metal Dealer
Trades & Service Transporting, Storage and Logistics (excluding imports/exports)		Unregulated/ Unregistered charities/ Utilities Wholesale and Retail NPO/NGO
Other:		
Position (incl previous position held if Retired or Unemploy	ed)	
Managing director/CEO Executive management/Director	С	Senior management O Non-senior O General Employee/ Non-management
High ranking officer Senior Government official (e.g, Judge, Magistrate, Politician)		
Other:		



Applicant 2

Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss	\bigcirc (Other	:					
Full forename(s)														
Full surname(s)														
Previous name(s) or alias(s) (eg., maiden name)														
Gender (√)	\bigcirc	Male	\circ	Fema	ale									
E-mail address (mandatory)														
Marital Status	\bigcirc	Divo	rced	() м	arried	\bigcirc	Single	\circ	Wide	owed	\bigcirc	Legal	ly sep	arated
Date of birth	D	D	М	М	Y	Y	Y	Y						
Country of birth														
Nationality														
Dual Nationality (if applicable)														
SA ID number														
Passport number (if no SA ID number)														
Stand/Plot/Erf number														
Current Residential Address (Where you currently live. This address must														
match the address given in the document to verify residential address.)	Post	code												
Country where currently residing														
Permanent Residential Address (Required if you are temporarily residing outside of South Africa, state address details of your														
permanent residence)	Post	code												
Country of permanent residence														
Mobile number														
Another Contact number (optional)														
		Dive	rsifica	ation o	f asse	ts	🔵 Sa	ving	for the	futu	re	\bigcirc	Savir	ng for retirement
Reason for Investment	\bigcirc	Esta	te pla	nning			O Ot	her:						

Politically Exposed Persons (PEP)

PEP (Politically Exposed Person); i.e. a person who holds or has held high political office, or is or has been employed in a prominent public capacity, or the applicant is closely related to or associated with such a person. If the applicant(s), or any other party connected to this application either now or in the past/future, could be classed as a PEP, or connected with a PEP, please provide details.

Applicant 2 () Yes ()	No
Reason for PEP status	

Please note that Old Mutual Isle of Man will need further documentary evidence on the origin of wealth to support applications from parties who are, or are connected to PEPs.



A Applicant Employment Details (Continued)

Employment Details (refer to the tables below and complete the options available in the applicable text boxes)

Employment Status (√)	Employed Self-Employed Retired Unemployed Never been employed Image: Self-Employed Image: Self-Employed Image: Self-Employed
Occupation (incl previous Occupation if Retired or Unemployed)	
If Employed (Name of employer or your company name)	
If Self-employed (Trading As name)	
Name of employer or name of your own company or employer name prior to retirement/unemployment	
Address of employer or your own company – also	
applicable if Retired or Unemployed	
	Postcode
Country	
Date of retirement/Date of unemployment (If applicable)	D D M M Y Y Y Y
Industry or Nature of Business: (incl previous Industry if Ret	ired or Unemployed)
Administrative and Support service Agriculture/Forestry and Fishing	Arms Manufacturers Art/Antique/Jewelry and Dealers
Arts/Entertainment Atomic/Nuclear power generation	Construction and Cryptocurrency Assets Design & Architecture
C Education/Healthcare C Energy & Solar and Social work	Financial, Insurance and Banking Gambling Industry (Casino, slot machines, betting) Hospitality
Imports/Exports Information/ Communication, Media and Technology	C Manufacturing (Import/ C Manufacturing Export) (Non-Import/Export) C Marketing/Advertising
Mining: Extraction of precious metals and minerals Motor trade/dealership	Private Military Professional Services Public Sector: Defence and Safety
Public Sector: Procurement, Infrastructure and Administration Public Sector: Procurement, Infrastructure and Public Sector: Real Estate: Development, Sales and/or Letting	Regulated/Registered Science and Scrap metal Dealer Charities/NPO/NGO Laboratories Scrap metal Dealer
Transporting, Storage and Logistics (excluding imports/exports)	Unregulated/ Unregistered charities/ Utilities Wholesale and Retail NPO/NGO
Other:	
Position (incl previous position held if Retired or Unemployed	d)
Managing director/CEO Executive management/Director	Senior management Non-senior General Employee/ Mon-management Non-management
High ranking officer Senior Government official (e.g., Judge, Magistrate, Politician)	
Other:	

For additional applicants, please photocopy Section A, attach the details with this Application Form and tick here ($\sqrt{)}$



B Beneficiary Nomination

Listed below are the Beneficiaries who will be entitled to the Investment Portfolio+ and benefits arising upon the death of the relevant Contract Holder.

Primary Beneficiaries

* Total must add up to 100% across all Primary Beneficiary nominations

Upon the death of the relevant Contract Holder, the Investment Portfolio+ and all benefits and rights attached to it shall be transferred to the Primary Beneficiaries in the proportions indicated.

If one or more of the Primary Beneficiaries do not survive the Contract Holder, their share(s) will be distributed between the Primary Beneficiaries alive or still in existence on the date of death of the deceased Contract Holder, if more than one, on a pro rata basis.

Nomination 1								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss		
	\bigcirc	Othe	r:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								
Date of birth	D	D	М	М	Y	Υ	Y	Υ
Relationship to Contract Holder								
Current residential address								
	Cou	ntry						
	Pos	tcode	•					

Nomination 2								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss		
	\bigcirc	Othe	r:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								
Date of birth	D	D	Μ	Μ	Y	Y	Y	Y
Relationship to Contract Holder								
Current residential address								
	Cou	ntry						
	Pos	tcode						

Nomination 3								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss	;	
	\bigcirc	Othe	er:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								
Date of birth	D	D	Μ	М	Y	Y	Y	Y
Relationship to Contract Holder								
Current residential address								
	Cou	intry						
	Pos	tcode	•					

Nomination 4								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss		
	\bigcirc	Othe	r:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								
Date of birth	D	D	М	М	Y	Y	Y	Υ
Relationship to Contract Holder								
Current residential address								
	Cou	ntry						
	Pos	tcode						

For additional applicants, please photocopy Section B, attach the details with this Application Form and tick here ($\sqrt{)}$ (



B Beneficiary Nomination

Secondary Beneficiaries

If no Primary Beneficiaries survive the Contract Holder, the Investment Portfolio+ and all benefits and rights attached to it shall be transferred to the Secondary Beneficiaries in the share(s) indicated.

If, upon the death of the relevant Contract Holder, there are (i) no Primary or Secondary Beneficiaries then living or in existence or (ii) who, if then living disclaimed in writing their interest in the Investment Portfolio+, then the Investment Portfolio+ and all benefits and rights attached to it shall be transferred to the relevant Contract Holder's deceased estate.

Nomination 1										
Beneficiary % split *								%		
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss	;			
	\bigcirc	Other:								
Full forename(s)										
Full surname(s)										
Previous name(s) or alias(s) (eg., maiden name)										
Date of birth	D	D	М	М	Y	Y	Y	Y		
Relationship to Contract Holder										
Current residential address										
	Cou	ntry								
	Pos	tcode								

Nomination 2								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss		
	\bigcirc	Othe	r:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								
Date of birth	D	D	М	М	Y	Y	Y	Y
Relationship to Contract Holder								
Current residential address								
	Cou	ntry						
	Pos	tcode						

Nomination 3								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss		
	\bigcirc	Othe	r:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								-
Date of birth	D	D	М	М	Y	Y	Y	Y
Relationship to Contract Holder								
Current residential address								
	Cou	ntry						
	Pos	tcode						

Nomination 4								
Beneficiary % split *								%
Title (√)	\bigcirc	Mr	\bigcirc	Mrs	\bigcirc	Miss		
	\bigcirc	Othe	r:					
Full forename(s)								
Full surname(s)								
Previous name(s) or alias(s) (eg., maiden name)								
Date of birth	D	D	М	М	Υ	Y	Υ	Υ
Relationship to Contract Holder								
Current residential address								
	Cou	ntry						
	Post	tcode						

For additional applicants, please photocopy Section B, attach the details with this Application Form and tick here ($\sqrt{)}$ (



C1 Description of Current Wealth

Overall Wealth

Important: In order to manage your account, Old Mutual Isle of Man needs to understand your wealth and how it was acquired. **Overall Wealth** – please select the applicable option(s):

- Family/generational and personal wealth (e.g. Inheritance, Gift/donation, Sale of property)
- 🕖 Income, revenue and business activities (e.g. Accumulated income, Salary, Bonus, Sale of interest in company, Dividends, Distribution from trust)

Investment Activities (e.g. Policies, Pension settlement, Sale of shares)

Income

Income

If you are retired or unemployed, please provide details of your salary/income prior to retirement or unemployment.

Income from current Employment: Please give an indication of the last year's combined (where applicable) salary/income/bonus:

Salary/Income:	Bonus:	Your additional	Description of additional annual income and
<r>R500,000</r>	<r>R500,000</r>	annual income	amount in relevant currency
R500,001 - R1,500,000	R500,001 - R1,500,000	Example: Pension payment,	
R1,500,001 - R3,000,000	R1,500,001 - R3,000,000	Dividends, Interest,	
R3,000,001 - R5,000,000	R3,000,001 - R5,000,000	Property (rental income)	
>R5,000,001	>R5,000,001		

C2 Source of Funds – Activity generating the contribution of the Investment

Please select the applicable option and then complete the information required.

	Name of bank									
	Name of person who held the savings									
	Bank account number									
Savings	Detail on how savings were accumulated, e.g. salary/bonus or any other source held in your bank account									
	Total amount of savings received (specify currency)									
	How long was the savings held for?	Y	Y	Year	S	М	Μ	Mon	iths	
	Name of company/financial institution (e.g. Investment house or insurance company)									
	Name of person who held the investment									
	Investment/policy number									
Investment/insurance	Total amount paid out (specify currency)									
	Date liquidated	D	D	М	М	Y	Y	Y	Y	
	How long was the investment/policy held for?	Y	Y	Year	S	Μ	Μ	Mor	iths	



C2 Source of Funds – Activity generating the contribution of the Investment

Please select the applicable option and then complete the information required.

	Full name and surname of the deceased									
	Relationship to the deceased									
	Date of death	D	D	М	Μ	Y	Y	Υ	Y	
Inheritance	How was the wealth of the deceased accumulated, e.g. savings during lifetime, retirement funds, sale of properties, etc?									
	Amount received (specify currency)									
	Date received	D	D	Μ	Μ	Y	Y	Y	Y	
	Name of donor (proof of identification and residential address to be provided)									
	Relationship to donor									
Gift/donation/loan from an individual	Origin of wealth (summary of how the wealth was acquired and accumulated by the donor)									
	Amount received (specify currency)			1	I		I		1	1
	Date received	D	D	Μ	Μ	Y	Y	Y	Y	
	Name of company									
	Address of property/company sold									
	Connection to company/property (e.g. owner, shareholder)									
Sale of property and/ or company	Nature of business (if company sale)									
0. company	Date of sale	D	D	М	М	Y	Y	Y	Y	
	Amount received from sale (specify currency)									
	Date received	D	D	Μ	Μ	Y	Y	Y	Y	
	Name of trust									
	Name of donor									
	Relationship to the trust									
 Distribution from a family trust 	Information on source of funding/ immediate activity generating the funds for the distribution (where did the funds originate from that are being distributed)									
	How was the wealth of the settlor/donor accumulated to create/fund the trust?									
	Amount received (specify currency)									
	Date received	D	D	М	М	Y	Y	Y	Y	
	Name of company									
	Name of person who dividends were paid to									
Dividends	Total amount of dividends received (specify currency)									
	Date received	D	D	М	М	Y	Y	Y	Y	



C2 Source of Funds – Activity generating the contribution of the Investment

	Name of company									
\frown	Relationship to company									
Loan/loan repayment	Amount received (specify currency)									
	Date received	D	D	М	Μ	Y	Y	Y	Y	
	Name of company/financial institution									
	Name of person who held the pension									
O Pension Settlement	Investment/policy number									
	Total amount paid out (specify currency)									
	Date received	D	D	М	Μ	Y	Y	Y	Y	
	Origin of wealth									
	Summary of how the wealth was acquired and accumulated									
Other (additional evidence	Amount received (specify currency)									
and information may be required)	Date received	D	D	М	М	Y	Y	Y	Y	
	Detailed explanation of activity									

Additional requirements:

Old Mutual Isle of Man reserves the right to request any further information/documentation.

Additional Notes:

C3 Bank details funding the contribution

This section must be fully completed in all instances.

The investment amount will be invested after all requirements have been met and, where applicable, after the SARS (South African Revenue Service) Application for International Transfer (AIT) has been received.

Source of premium account funding the payment to Old Mutual Isle of Man

Please detail the account from which payment is being made to Old Mutual Isle of Man. Please complete (a) and/or (b) as appropriate.

For Contributions from multiple bank accounts, please photocopy this page and complete for each bank account. (a) Payment from Applicant

If payment is made from outside of your tax residency/where you are residing, please select the applicable option:

If the payment originates out of a high-risk jurisdiction, Old Mutual Isle of Man reserves the rights to request additional supporting documentation.

\bigcirc	l live(d) in that country	I work(ed) in that country		family live in t country	\bigcirc	l travel to that country	\bigcirc	l do business in that country	\bigcirc	l own property in that country
\bigcirc	I need it for tra (provide a reason	nsaction purposes why this country was chose	n)							
\bigcirc	Other (please provide a	reason if other is selected)								



C3 Bank details funding the contribution

Payment amount								1	Paym	ent cu	irre	ncy									
Bank name																					
Bank address																					
-																					
-	Postc	ode																			
Country																					
Account holder's name (as stated on bank account)																					
SWIFT or BIC Code** (If applicable																					
Bank account number/IBAN*	er/IBAN*																				
Bank account currency																					
 * IBAN stands for International Bank Account Number and is always used in conjunction with a bank identifier code (BIC). ** A sort code is used in the UK in conjunction with a bank account number. A SWIFT code is used outside Europe in conjunction with a bank account number. A BIC code is used in Europe in conjunction with an IBAN. 																					
Foreign Exchange (FX) (Pleas	se ens	sure t	his sec	tion	is com	plet	ed v	whe	ere ar	FX p	orov	/ider	is u	sed a	and diffe	rs to	the k	ank	deta	ailec	labove
Premium being paid using ar	FX pr	rovide	er 🔿																		
Bank name																					
Account opened to facilitate t	ax cle	aranc	e and	curr	ency co	onve	ersio	n, tl	heref	ore a	ссо	unt c	deta	ils ar	e not kno	own					
(b) Payment from third-part	/																				
Third-party payments, such a may accept payments in the Please ensure that any third p	follow	ving s	situatio	ons a	and wit	h th	ne fo	llov	ving	addit	ion	al do	cun	nent	ation. Ple						
Payment from an ac	count	t in tł	ne app	olica	nt(s) na	ame	ata	a re	putal	ole, r	egı	ulate	d fiı	nanc	ial instit	utio	n.				
Copy documentation (Note: payment from	show	ving c	letails	ofth	ie inves	stme	ent a	ind	the p	aym	ent	trans	sfer	may	be requ	este					
Name of financial institution																					
Country																					
Payment by one spo The Payor's valid pase section (a) above. Sou	sport	or nat	ional i	dent	tity car	d plu	us re	sid	entia						ease con	nple	te the	e Pay	or's	deta	ails in
For each individual payor, yo of residential address.	u will	l need	d to pr	ovid	le a cei	rtifie	ed c	ору	of th	e va	lid	pass	port	or r	ational i	ider	ntity c	ard a	and	evic	lence
Payment from an exA letter (or certified ccopy of correctly cert	opy) f	rom t	he exe	ecuto	or conf	irmi	ng t	hes	sourc	e of f	unc	-	-	-			-				
Name of Executor																					

For additional applicants, please photocopy Section C, attach the details with this Application Form and tick here ($\sqrt{)}$



Contribution and Contract Currency

Please note: You will be allocated 1000 Contracts which is the maximum number allowed. Minimum initial investment amounts:

Direct Funds - £ 15,000 or 20,000 for other currencies (except ZAR)

Curre	ncy (√)	An	nour	nt											
\bigcirc	US\$														
\bigcirc	£														
\bigcirc	€														
\bigcirc	CHF														
\bigcirc	AU\$														
\bigcirc	Or enter the ZAR amount														

I request my Contract Currency to be (please tick one of the following).

\bigcirc	US\$	The Contract Currency cannot be changed once the Contract has been issued.
\bigcirc	£	Your Contract valuation will be summarised in your chosen Contract Currency.
\bigcirc	€	If you choose a Contract Currency other than that in which you made your Contribution, you should be
\bigcirc	CHF AU\$	aware that we will notionally convert the Contribution into your chosen Contract Currency. This means we will not physically convert the Contribution; but the converted amount will be the amount which is shown in your Contract Summary.
\bigcirc	A04	Any conversions that we make will be based on the closing 'market mid-rate'* provided to us by a third- party currency rate provider, on the working day before we allocate your Contribution to your Contract.
		If additional currency conversions are required as a result of transactions within your Contract, you should be aware that delays may occur.
		* All Currencies have a market rate. Any provider dealing with Currencies will independently set different 'buy' and 'sell' rates, which include overheads and profit margins. The market mid-rate is derived from the mid-point between the 'buy' and sell' rates used in the global markets.

D2 Investment Choices

Direct Funds (including Model Portfolios)

Available on a Contract with an initial Contribution of at least \pm 15,000 or 20,000 for other currencies.

Please complete the Direct Funds/Model Portfolios in the section below and only Section E1 to appoint a Model Portfolio Manager. Please refer to Investment Portfolio+ Fund list for relevant Fund Codes.

Code	Name	Currency	Proportion %
Transaction account percenta	ge*		
		Total	100%

* Please indicate the % of your Contribution that should be kept in your Transaction Account held with Old Mutual Isle of Man to cover ongoing charges. No interest will be paid for any cash balance in the Transaction Account, please see the Investment Portfolio+ General Conditions for further details.



El Appointing a Model Portfolio Manager

If a Model Portfolio has been selected as an Investment choice, please acknowledge by completing the applicant(s) name.

I have attached the required signed copy of the mandate between myself and the Model Portfolio Manager. I give authority to Old Mutual Isle of Man to do the following on my behalf:

- 1. Allow the Model Manager to switch between funds within the selected Model Portfolio/s.
- 2. Pay the Model fee to the Model Manager by making partial surrenders from my Contract (refer to the Investment Portfolio+ General Conditions).

E2 Charges

The charging structure and currency that you choose for your Investment Portfolio+ cannot be changed once the Investment Portfolio+ has started and will apply to any additional Contributions which are made.

Financial adviser commission and fees

Please refer to the Terms 18 to 21 of the General Conditions for information on charges which may apply to your Investment Portfolio+ or speak to your financial adviser.

VAT will be included in commission payments where applicable. The charges/fees will be levied at the end of the relevant calendar quarter.

Please indicate your chosen charging structure and complete the relevant information ($\sqrt{}$)

(If no box is ticked, the application cannot be processed)

Charging option 1	Charging option 2						
nitial Commission payable to your financial adviser	Initial Commission payable to your financial adviser						
Maximum of 3% of your contribution amount. (VAT will be automatically added if applicable.)	Subject to a maximum of 3% (VAT will be automatically added if applicable.)						
Initial Commission to be paid %	 The Advice Fee is an amount that you have agreed to pay your financial adviser for providing you with advice. 						
Any commission being waived should be used to $()$ (not applicable if 3% has been selected above) \bigcirc Reduce the Contract \bigcirc Enhance the	 This amount will be deducted by Old Mutual Isle of Man on your instructions prior to investing the Contribution on the Contract Commencement Date and is based on your Contribution. 						
\bigcirc Establishment Charge \bigcirc Allocation Percentage	 For clarity, the Advice Fee is not a commission payment paid by Old Mutual Isle of Man. 						
	Initial Advice Fee %						

Ongoing fee

Investment Review Fee - if selected, payable from inception:

- The Investment Review Fee is an additional ongoing fee that you have agreed to pay your financial adviser for providing you with ongoing advice.
- You have instructed Old Mutual Isle of Man to pay this Fee to your financial adviser by making partial surrenders (refer to the Investment Portfolio+ General Conditions) from your Contract.
- For clarity, this is not a commission payment paid by Old Mutual Isle of Man.
- Subject to a maximum equivalent of 1% per annum (VAT will automatically be added if applicable).

%

per annum of the value of my Portfolio Fund to be taken



Declaration and Applicant(s) Signature(s)

This section must be read, understood and completed in all cases.

Tax residency detail

E

Each country has its own rules for whether a person is resident for tax purposes or not. It is possible to be resident for tax purposes in more than one country. Depending on the rules of the country, tax residency may be determined by factors such as where you permanently live, where you were born, or if you live and work in the country for more than half the year. If you are a USA citizen or hold a USA passport or green card, you will also be considered resident for tax purposes in the USA even if you live outside the USA, unless you have given up your citizenship.

Please tick the applicable option/s and complete the Income Tax Reference Number.

		Applicant 1	Applicant 2
1.	SA Resident for Tax	🔿 Yes 🔿 No	🔿 Yes 🔿 No
	Income Tax Reference Number		
2.	USA citizen and/or Tax Resident	🔿 Yes 🔵 No	◯ Yes ◯ No
	Income Tax Reference Number		
3.	Tax Resident in any other Country	🔿 Yes 🔿 No	🔿 Yes 🔿 No
	Country		
	Income Tax Reference Number		

I declare that:

- 1. The information provided above is correct. If I am a tax resident of any country other than or in addition to South Africa, I have stated this above. I undertake to advise Old Mutual Isle of Man within 30 days should information contained in this form change.
- 2. The premium detailed in this application and any other premium tendered in respect of this application are derived solely from the source of funding provided and have, where required, been declared to the relevant tax authority in my country of residence for taxation.
- 3. The application for an Old Mutual Isle of Man policy is not being made for the purpose of concealing funds, assets or wealth with a view to the evasion of any taxes I am obliged to pay.
- 4. The information provided is correct and true and that I will immediately inform Old Mutual Isle of Man of any change in the information provided for update, including a change in address or residency.

I CONFIRM THAT I HAVE READ AND UNDERSTOOD ALL DETAILS SUPPLIED IN THE APPLICATION FORM, IN ITS ENTIRETY AND UNDERSTAND ITS IMPLICATIONS AS WELL AS THE INFORMATION INCLUDED IN THE KEY FEATURES AND GENERAL CONDITIONS DOCUMENTS RESPECTIVELY.

Signature(s) of Applicant(s)

Signature of applicant 1	Date	D	D	Μ	М	Y	Y	Y	Y
Country where signed									
Signature of applicant 2 (If any)	Date	D	D	М	М	Y	Υ	Υ	Y
Country where signed									

Please note that we may require additional documentation to verify the applicant(s) identity and address if the documentation we currently hold does not meet with any current regulatory requirements.

For additional applicants, please photocopy Section F, attach the details with this Application Form and tick here ($\sqrt{}$)



Postal:

Data Privacy Notices G

Old Mutual Isle of Man Branch Privacy Notice:

The Company: Old Mutual Isle of Man Branch of Old Mutual Life Assurance Company (South Africa) Limited Jurisdiction: Isle of Man

Contact details for the Data Protection Officer:

Telephone: +44 (0) 1624 690200 E-mail:

enquiries@impactiom.com

5A Village Walk, Onchan, Isle of Man, IM3 4EA

The Company processes your personal data and that of any other party whose personal data has been supplied to us, for the purpose of establishing and servicing the IP+ contract. Personal data will be processed and may be shared with other parties outside of the Old Mutual Group for the following purposes:

- Check against credit reference or databases to verify information provided for regulatory due diligence purposes. (a) Prevention and detection of crime including money laundering, terrorist financing, bribery, or fraud;
- (b) Allow for the provision of services relating to reinsurance, data hosting, online services, payment or reporting of any tax or levy, or provision of any other services to Contract Holders from time to time;
- Enable your appointed financial adviser to assist in the provision of services to the Contract Holder;
- (d) Compile statistical analysis or market research, where information is not specific to an individual.
- Comply with any legal obligation which includes the releasing of personal data to regulators, law enforcement (e) authorities or other bodies where there is a legal requirement to do so.

Transfer of data

Personal data may be shared or transferred both within the Isle of Man and the European Economic Area (EEA) and outside the EEA with members of the Old Mutual Group (OMG) and third parties who provide services to OMG. It should be noted that countries outside the EEA do not necessarily have data protection legislation equivalent to those that apply within the Isle of Man or EEA. In such instances, we will ensure that the transferred personal data is protected by a data transfer contract.

How to withdraw consent

You can withdraw your consent for us holding your personal information at any time.

Should you withdraw your consent, preventing the processing of your personal data, this may impact the service we provide, or stop us from administering your contract.

Privacy policy

You will find parts of this notice included as part of our full privacy notice on our website

(www.omi-int.com/privacyPolicy.html) and in the Investment Portfolio+ General Conditions.

Data Protection Officer (DPO)

You can contact the DPO for a full copy of our privacy notices using the contact details above.

Old Mutual Life Assurance Company South Africa (OMLACSA) Privacy Notice:

The Old Mutual Group may use your information or obtain information about you for the following reasons:

- Underwriting; (a)
- (b) Assessment and processing of claims;
- Credit searches and/or verification of personal information; (C)
- (d) Claims checks (ASISA Life and Claims Register);
- (e) Tracing beneficiaries;
- (f) Fraud prevention and detection;
- (g) Market research and statistical analysis;
- (h)Audit and record keeping purposes;
- Compliance with legal and regulatory requirements; (i)
- Verifying your identity;
- Sharing information with service providers we engage to process such information on our behalf or who render (k) services to us. These service providers may be abroad, but we will not share your information with them unless we are satisfied that they have adequate security measures in place to protect your personal information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases you have the right to object to the processing of your personal information.

You also have the right to complain to the Information Regulator, whose contact details are:

Website:	https://www.justice.gov.za/inforeg
General enquiries:	<u>inforeg@justice.gov.za</u>
Complaints:	<u>complaints.IR@justice.gov.za</u>

To view our full privacy notice and to exercise your preferences, please visit - www.oldmutual.co.za

INTERNATIONAL

www.omi-int.com

Old Mutual Isle of Man Branch of Old Mutual Life Assurance Company (South Africa) Limited, is registered in the Isle of Man under number 005664F and whose principal place of business is 5A Village Walk, Onchan, Isle of Man, IM3 4A, British Isles.

Permitted to carry on long-term Insurance Business in and from the Isle of Man by the Isle of Man Financial Services Authority.

Old Mutual International is a division of Old Mutual Life Assurance Company (South Africa) Limited, a licensed Financial Services Provider and Life Insurer. Registration Number 1999/004643/06. Registered office: Mutual Park, Jan Smuts Drive, Pinelands, Cape Town, South Africa.



H Declaration and Financial Adviser Signature

Conflict of interest disclosure notice

Old Mutual Isle of Man and our financial advisers have a duty to act in your, and the clients', interest when you are the recipient of our financial advice. Not only should we be objective and professional, but we must also avoid any conflict of interest or manage the conflict if it cannot be avoided. Lastly, we must disclose any potential conflicts of interest to you.

We ensure that we deliver on the above through our financial advice process, of which this disclosure notice is a part. Full disclosure of any potential conflicts of interest enables you to make informed financial decisions.

I declare that:

- 1. I am aware and understand the contents of the Data Privacy Notices and the Conflict of Interest Disclosure Notice.
- 2. I have established and verified the identity of my client in accordance with the Financial Intelligence Centre Act and its regulations.
- 3. I have taken reasonable steps to make sure that the funding is legitimate and in line with the applicant's circumstances.
- 4. To the best of my knowledge and belief, all the information provided in and with this application is true and complete and was obtained from the applicant(s) who is/are of good standing. I also confirm that I will provide further information if required.
- 5. I have not made any changes to the Application Form after the applicant(s) has signed it.
- 6. In the case of a policy replacement, I have explained the meaning and implications of the replacement to my client. The client is fully aware of the potentially harmful consequences of the replacement of an investment. I have attached the completed and signed generic Replacement Policy Advice Record provided by ASISA.

I confirm that no commission shall be payable in the event of a switch from one IP+ investment option to another resulting in the issuing of a new IP+ policy (where applicable).

7. I met the client: In person () or virtually online ()

I confirm that I gave advice concerning this investment to the applicant(s) in



I confirm that all information provided was received directly from the applicant(s).



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country



Supporting Documentation Required

Old Mutual Isle of Man is subject to anti-money laundering and countering terrorist financing legislation in South Africa and the Isle of Man, in terms of which applicants and related parties must submit proof of identity and verification of residential address. Outlined below are the standard minimum requirements. In some circumstances we may need additional information.

Please note that we will not be able to set the contract live until the necessary identification documentation has been provided.

Verification of identity & Verification of proof of residence

A "selfie" of the contract holder/s holding their Identity Document (ID) along with a separate clear uncertified copy of the same ID OR A certified copy of identification will be required if the existing document held by Old Mutual Isle of Man has expired and/or changed. (If the new South African ID Card is submitted as Proof of Identity, please ensure that both sides of the ID card is submitted as the rear/back view of the ID Card reflects the date of issue).

An uncertified E-statement downloaded as a pdf, e.g. not printed and scanned before submitting OR a certified copy of the proof of residential address will be required if the existing document held by Old Mutual Isle of Man has changed. The document must not be older than 3 months indicating the residential address for each contract holder.



- · A recent utility, rates or council tax bill (cell phone bills not acceptable)
- · A recent mortgage statement, evidencing the residential address
- A state pension, benefit or other government produced document showing benefit entitlement
- A recent tax assessment document
- A recent account statement from bank or credit card (store cards not acceptable)
- Proof of ownership or rental of the residential address
- Note: If the statement or bill is in an e-format, it must clearly show the address of the property. E-bill must be downloaded to a PDF and sent by email.

Certification Requirements

In the certification, preferably but not necessarily in the form of a stamp, the certifier must:

- State the capacity in which they are certifying the document, e.g., that they are a Commissioner of Oaths, Advocate, Lawyer, SA Attorney, Notary Public, an employee of Old Mutual International or any group company, an IFA or CFP regulated in SA, an Accountant or a Police Officer.
- Sign and date the certification, and provide their full name and contact details in the form of a physical address and include telephone number or email address.

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