



# Additional Investment Form

## Investment Portfolio+ for the Trustee investor

November 2019

### Financial adviser's details

OMI broker number	<input type="text"/>
Name of financial adviser	<input type="text"/>
OMI consultant code (if applicable)	<input type="text"/>
OMLAC(SA) code (if known)	<input type="text"/>
Corporate adviser code (if applicable)	<input type="text"/>
Company name	<input type="text"/>
Address	<input type="text"/>
Telephone number	<input type="text"/>
Cell number	<input type="text"/>
E-mail address	<input type="text"/>
FAIS licence number	<input type="text"/>
Categories of FAIS licence held	<input type="text"/>

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.

**This Additional Investment Form is for Trustee (individual or corporate) Contract Holders only. If you are an individual or corporate Contract Holder, you should use the alternative Additional Investment Form which is available from your financial adviser. Please check with your financial adviser that this is the latest available document. If you require any help accessing and completing any additional forms referenced in this application or if you have any questions when you complete the form, please speak to your financial adviser.**

This Additional Investment Form should only be used when applying for an additional investment into an existing Old Mutual International Investment Portfolio+, 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"), and should be read in conjunction with the:

- Investment Portfolio+ Key Features Document
- Investment Portfolio+ General Conditions
- Investment Portfolio+ Investment Choices Brochure

(Please refer to our website [www.oldmutualinternational.com](http://www.oldmutualinternational.com) or your financial adviser for the above literature.)

When the singular is used (for example I/my), then it also includes the plural (for example we/our) and vice versa.

**Please Note: If you wish to add a custodian or change an existing custodian, this must be done before this additional investment, through the Change of Custodian form.**

To complete this form:

- Use BLOCK CAPITALS only
- Use blue or black ink
- Complete all relevant sections
- Do not use correction fluid; any amendments should be crossed out and signed by all relevant authorised signatories/-Contract Holders
- Any incomplete information will need to be confirmed in writing by you to Old Mutual Isle of Man.

Please provide the existing Plan number for this additional investment:



INTERNATIONAL



## A Details of the Trust

Trust name

Trust number (if applicable)

Created on (please enter date)  /  /  Please state jurisdiction of Trust

Correspondence address

Reason for investment (for example, inheritance tax planning)

Please state if a Protector has been appointed and is required to sign on behalf of the Trust.

Details of Donor(s)/Settlor(s)  
(Only if different from the original investment, state the name, address and date of birth for each Donor/Settlor. ID and proof of residential address should be provided with this application. If the Donor is deceased, please provide name, last address, date of birth and date of death)

Beneficiary 1  
Class of beneficiary

Name

Date of birth or death  /  /   Birth  Death

Residential address

Beneficiary 2  
Class of beneficiary

Name

Date of birth or death  /  /   Birth  Death

Residential address

Beneficiary 3  
Class of beneficiary

Name

Date of birth or death  /  /   Birth  Death

Residential address



## A Details of the Trust (continued)

Beneficiary 4  
Class of beneficiary

Name

Date of birth or death   /   /      Birth  Death

Residential address

## B Details of the Trustee (Individual/Corporate) Contract Holder(s)

### Details of Corporate Trustee Contract Holder

Corporate Trustee name

Contact person

Country of registration

Registered office address  
(The information must be provided in full. We are unable to accept PO Boxes and 'care of' addresses)

Correspondence address

Telephone number

Email address

Corporate website address

### Authorised signatories

Please reconfirm the minimum number of authorised signatories of the Corporate Trustee needed to give instructions.

Please provide a suitably certified copy of the authorised signatory list, including signing powers.



## B Details of the Trustee (Individual/Corporate) Contract Holder (continued)

### Details of Individual Trustee Contract Holder(s)

In this section, please give details of all Trustee Contract Holder(s).

	Trustee Contract Holder 1	Trustee Contract Holder 2
Title (√)	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Other <input type="text"/>	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Other <input type="text"/>
Full forename(s)	<input type="text"/>	<input type="text"/>
Full surname(s)	<input type="text"/>	<input type="text"/>
Previous name(s) or alias(s)	<input type="text"/>	<input type="text"/>
Gender (√)	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female
Date of birth	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Country of birth	<input type="text"/>	<input type="text"/>
Nationality	<input type="text"/>	<input type="text"/>
Dual nationality (if applicable)	<input type="text"/>	<input type="text"/>
Passport number/ID number	<input type="text"/>	<input type="text"/>
Residential address (where you currently live. Please provide proof of residential address with this application.)	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Postcode	Postcode
Country of residence	<input type="text"/>	<input type="text"/>
Stand/Plot/Erf number	<input type="text"/>	<input type="text"/>
Telephone number	<input type="text"/>	<input type="text"/>
Fax number	<input type="text"/>	<input type="text"/>
Cell number	<input type="text"/>	<input type="text"/>
E-mail address	<input type="text"/>	<input type="text"/>

*Old Mutual Isle of Man or the Reinsurer (where applicable) accepts no responsibility for the consequences of sending documentation to the Trust's correspondence address, or to an address notified subsequently. Old Mutual Isle of Man or the Reinsurer (where applicable) reserves the right to send correspondence to your residential or registered office address where regulations prevent it being sent to an alternative address.*

### Politically Exposed Persons (PEP)

If the Contract Holder(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.

A PEP is an individual or entity that is, or has been, entrusted with a prominent public function or such parties associated with them (examples of PEPs: Heads of State or Government, judicial or military officials, senior politicians or senior executives of publicly owned corporations).

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

**ALL RELEVANT CONTRACT HOLDERS MUST COMPLETE AND SIGN THE DECLARATION IN SECTION F**



## C Contribution and Investment Options

### Contribution

Please complete your additional Contribution(s) below:

Currency (✓)	Amount
<input type="radio"/> £	<input type="text"/>
<input type="radio"/> US\$	<input type="text"/>
<input type="radio"/> €	<input type="text"/>
<input type="radio"/> CHF	<input type="text"/>
<input type="radio"/> AU\$	<input type="text"/>
Or enter the Rand amount	<input type="text"/>

Minimum additional investment amounts:

£ 5,000 or 7,500 for other currencies

Please refer to 3.8.4 in the General Conditions for more details on the maximum additional investments allowed.

Your additional Contribution will be held in the Transaction Account held with Old Mutual Isle of Man. Depending on your investment selection, the additional Contribution will be invested in Internal Funds and/or transferred to the Transaction Account with your selected Authorised Custodian, awaiting investment instructions. Therefore there may be a delay between our acceptance of your additional Contribution and it being invested.

### Transaction Account

We recommend that you keep approximately 2% of your additional Contribution in the Transaction Account held with Old Mutual Isle of Man to cover ongoing charges.

What proportion, if any, of your additional Contribution would you like allocated to the Transaction Account held with Old Mutual Isle of Man?  %

No interest will be paid for any cash balance in the Transaction Account held with us.

Please note, it is your fund adviser's, also known as your Discretionary Investment Manager's, responsibility to ensure liquid assets are available to pay ongoing charges.

Where the deduction of charges leads to a debit balance in the Transaction Account, please see the Investment Portfolio+ General Conditions for further detail.

### Investment

Please indicate (✓) whether you wish your additional investment to be invested:

In the same funds and same proportions as your original contract.

**Please note: If your additional investment amount results in the total investment amount being greater than £100, 000 (or currency equivalent of) and you wish to add an Authorised Custodian Facility, you must complete section D and F of the Investment Portfolio+ application form, including the Letter of Authority.**

As per the following internal fund allocation:

Fund Name <sup>1</sup>	Fund Identifier <sup>2</sup>	Fund Currency	Proportion (%)
<b>Additional Funds must total 100%</b>			<b>100%</b>

<sup>1</sup> For a list of available funds, please refer to the Fund Factsheets and Investment Choices list available from your financial adviser.

<sup>2</sup> Please refer to Fund Factsheets and Investment Choices list for relevant Fund Identifier.



## D Charges

Please see 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.

The charging option and currency that you chose for your Investment Portfolio+ cannot be changed now that it has started and will apply to any additional Contributions which are made. This includes details about your chosen financial adviser. We do however require you to reconfirm certain fee information below.

Please refer to the Investment Portfolio+ Investment Choices Brochure and General Conditions for fee information.

### Financial adviser Commission and Fees

**Please Note: Charging options cannot be changed. The Commission / Advice Fee percentage for the additional investment should be completed in the relevant charging section below.**

#### CHARGING OPTION 1

##### Commission payable to your financial adviser

(Maximum of 3% of your contribution amount. VAT will be added if applicable.)

Additional Commission to be paid  %

Additional Commission being waived  %

(Total 3%)

Any commission being waived should be used to (✓)  reduce the Contract Establishment Charge

OR

enhance the Allocation Percentage

#### CHARGING OPTION 2

##### Advice Fee

Subject to a maximum of 3% or 3.45% (if VAT is applicable.) Please note – only the % sum stated in the box below will be paid.

- The Advice Fee is an amount that you have agreed to pay your financial adviser for providing you with advice.
- This amount will be deducted by Old Mutual Isle of Man on your instructions prior to investing the additional Contribution and is based on your additional Contribution.
- For clarity, the Advice Fee is not a commission payment paid by Old Mutual Isle of Man.

Advice Fee  %



## E Source of Funding and Origin of Wealth

**THIS SECTION MUST BE COMPLETED IN ALL INSTANCES. PLEASE NOTE THIS SECTION CONTINUES ON THE FOLLOWING THREE PAGES.**

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

### Source of funds

**Please complete (a) and/or (b) as appropriate.**

For Contributions from multiple bank accounts, please photocopy this page and complete for each bank account and provide reasons for multiple payments.

Reasons for multiple payments:

#### (a) Payment from Trust

Please complete the information below. Payment should be received from a Trust bank account or from the Donor/Settlor's account (not from the Trustee bank account or third-party bank account).

Payment amount

Payment currency

Bank name

Bank address

Postcode

Country

Account holder's name  
(as stated on bank account)

Bank account number/  
IBAN\*

Sort code \*\*  
(if applicable)

SWIFT or BIC code\*\*  
(if applicable)

Bank account currency

How long has the  
account been held?

years

months

\* 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.

**OR**

#### (b) Third-party payments

Third-party payments, such as payments made by persons other than the Contract Holder(s), are not normally acceptable. However, we may accept payments from other financial services institutions, where the previous investment was held in respect of the Trust. Please tick if this is the case (✓)

Copy documentation showing the investment and the payment that will be required.

(Note: payment from unregulated companies or from certain jurisdictions may not be acceptable.)

### Trust assets

Please provide an indication of the value of the Trust's assets (please specify Currency)



**E Source of Funding and Origin of Wealth** (continued)

**THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.**

Full details of origin of wealth

**PLEASE TICK THE DESCRIPTION OPTION(S) RELATING TO THE ORIGINAL SOURCE OF THE ADDITIONAL CONTRIBUTION FOR YOUR INVESTMENT PORTFOLIO+ (✓).**

**YOU MUST FULLY COMPLETE EACH RELEVANT SECTION RELATING TO THE DESCRIPTION OPTION(S) YOU HAVE TICKED.**

**Accumulated savings/investments**

Amount of savings/  
investments  
(Please specify currency)

If more than one account/investment

Savings/investments  
held for

years

months

years

months

**Details of where funds are held:**

Account holder  
(name as stated on account)

Account number

Name of financial  
institution/bank



## E Source of Funding and Origin of Wealth (continued)

**THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.**

Full details of origin of wealth (continued)

**PLEASE TICK THE DESCRIPTION OPTION(S) RELATING TO THE ORIGINAL SOURCE OF THE ADDITIONAL CONTRIBUTION FOR YOUR INVESTMENT PORTFOLIO+ (✓).**

**YOU MUST FULLY COMPLETE EACH RELEVANT SECTION RELATING TO THE DESCRIPTION OPTION(S) YOU HAVE TICKED.**

<input type="radio"/>	Sale of shares	Name of company that held your shares/investment/policy (for example bank stockbroker or insurance company)	<input type="text"/>
<input type="radio"/>	Dividends		
<input type="radio"/>	Maturing investments	Name of person who held the shares/investment/policy	<input type="text"/>
<input type="radio"/>	Policy claim		
<input type="radio"/>	Replacement policy	How were they sold? (i.e. bank, stockbroker or other agent, if applicable)	<input type="text"/>
		Description of shares sold (if applicable)	<input type="text"/>
		Reason for policy claim or replacement policy (if applicable)	<input type="text"/> <input type="text"/> <input type="text"/>
		Total amount paid out (please specify currency)	<input type="text"/>
		Surrender penalty incurred (if any)	<input type="text"/>
		Date received	<input type="text"/>
		Shares/investment/policy held for	<input type="text"/> <input type="text"/> years <input type="text"/> <input type="text"/> months

<input type="radio"/>	Sale of property/interest in company	Name of company (if applicable)	<input type="text"/>
		Address of property/company sold (including postcode if applicable)	<input type="text"/> <input type="text"/> <input type="text"/>
		Nature of business (if company sale)	<input type="text"/>
		Total sale amount (please specify currency)	<input type="text"/>
		Amount received	<input type="text"/>
		Date received	<input type="text"/>



**E Source of Funding and Origin of Wealth** (continued)

**THIS SECTION MUST BE COMPLETED IN ALL INSTANCES.**

Full details of origin of wealth (continued)

**PLEASE TICK THE DESCRIPTION OPTION(S) RELATING TO THE ORIGINAL SOURCE OF THE ADDITIONAL CONTRIBUTION FOR YOUR INVESTMENT PORTFOLIO+ (✓).**

**YOU MUST FULLY COMPLETE EACH RELEVANT SECTION RELATING TO THE DESCRIPTION OPTION(S) YOU HAVE TICKED.**

<input type="radio"/> Other unearned income	Origin of wealth (if ticked gift or other)	<input type="text"/>
<input type="radio"/> Inheritance	From which organisation or whom (state the relationship if applicable)	<input type="text"/>
<input type="radio"/> Loan		<input type="text"/>
<input type="radio"/> Gift		<input type="text"/>
<input type="radio"/> Compensation		
<input type="radio"/> Competition or gambling win	Details (including reasons where applicable, how the money was acquired, etc.)	<input type="text"/>
<input type="radio"/> Other		<input type="text"/>
	Amount (please specify currency)	<input type="text"/>
	Date received	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

**We may also require additional documentary evidence to support your additional investment, particularly in relation to your country of residence, source of funding and investment amount, before we can process it.**

**Your financial adviser can establish if further documentary evidence is needed by contacting us before sending in your Additional Investment Form.**

**Please enter what documentary evidence you are enclosing with this Additional Investment Form (if applicable).**




## **F Declaration and application by the Trustee(s) (Individual/Corporate)**

**THIS SECTION MUST BE READ, UNDERSTOOD AND COMPLETED IN ALL CASES BY EACH TRUSTEE/AUTHORISED SIGNATORY FOR A CORPORATE TRUSTEE.**

### Application

The Trustees hereby request the additional investment is to be applied proportionately across the number of Contracts in our existing Investment Portfolio+.

Each of these Investment Portfolio+ Contracts is invested in the Portfolio Fund.

### Warranty

We, as Trustees, warrant that all the information given in this Additional Investment Form, and in all documents which have been or will be signed by the authorised signatories for the Trustee Contract Holder in connection with the Contract(s), whether in their handwriting or not, is true and complete.

### Declarations

We, the Trustees, understand and agree that:

1. All the terms and conditions from the original contract applies to this additional investment.
2. The information provided by us referred to in the Warranty above forms the basis on which Old Mutual Isle of Man decides whether to accept the additional investment.
3. Any mis-statement or omission herein may lead to any Contract(s) made being declared void by Old Mutual Isle of Man or the Investment Portfolio+ General Conditions being varied by Old Mutual Isle of Man. In such an event, the Trustee Contract Holder will be entitled to receive the additional investment back, less all charges, costs and currency and/or investment losses incurred.
4. Should this Additional Investment Form be accepted by Old Mutual Isle of Man, it will be conditional upon there having been no material alteration to the facts on which the acceptance was based.
5. No statement, whether made by us, as Trustees, or by the person canvassing for or handling this Additional Investment Form or by any other person, shall be binding upon Old Mutual Isle of Man unless the same be in writing, submitted to Old Mutual Isle of Man and made part of the Contract(s).
6. The addition to the Contract(s) will be concluded in the Isle of Man upon acceptance of the application by Old Mutual Isle of Man and will be governed by the laws of the Isle of Man.
7. Communication of acceptance by Old Mutual Isle of Man will not be given and we do not require such communication for the additional investment to be added to the Contract(s).
8. The additional contribution will form part of the original contract.
9. No representation, guarantee or warranty is made by Old Mutual Isle of Man as to the performance or investment returns of the underlying investment options selected by us. Old Mutual Isle of Man shall have no liability to us for any losses suffered by the Trustees as a result of our failure:
  - i. to read about and understand the nature of the investment in the underlying investment options;
  - ii. to have read and understood the information provided to us concerning investment in the Contract(s) and its underlying investment options;
  - iii. to have acquainted ourselves with all charges payable in respect of investment in the Contract(s) and its underlying investment options;
  - iv. to have obtained (or, having obtained, to have acted upon) advice concerning the appropriateness of the additional investment for the financial circumstances (including, but not limited to, the legislative and fiscal regimes of our country of citizenship, domicile or residence or that of any beneficiaries of the Trust which might affect the Contract(s) and any benefits payable thereunder);
  - v. to have reviewed regularly the continued suitability of the Contract(s).
10. Due to fluctuations in relative values of international currencies, there may be a risk of a reduction in the value of the capital invested when measured in any particular currency, and after currency conversions, the additional investment minimum must be attained as per the Investment Portfolio+ Key Features Document.
11. We bear the risk of changes in fund price or foreign exchange rates (if any) which may occur from the date of transfer of this Additional Investment to the date Allocated Units are purchased or Contribution being exchanged to a different currency.
12. Old Mutual Isle of Man will not accept or record a Security Cession where the cessionary is a South African resident until it is shown to the satisfaction of Old Mutual Isle of Man that the cessionary is in receipt of the requisite tax and South African Reserve Bank clearances.
13. a. A Security Cession will take precedence over any Beneficiary Nomination received and accepted by us;  
b. Any absolute assignment will invalidate any Beneficiary Nomination immediately.
14. All additional contributions are payable and have to be accepted in the Isle of Man in US Dollars, Euro, Sterling, Australian Dollars or Swiss Francs as denominated in the Contract(s) Summary.
15. Old Mutual Isle of Man's obligation is to pay proceeds to us as Trustees in the Contract Currency and, should we request payment outside the Isle of Man and/or in a currency other than the Contract Currency, we assume the risk associated with the transfer and/or currency conversion and any delays which may occur in this process.
16. We bear the risk of the method selected for communicating this application and/or any further application or communication with Old Mutual Isle of Man and Old Mutual Isle of Man will not be liable for any loss suffered by the trust as a result of the use thereof.
17. We are entitled to ask for a copy of this Additional Investment Form and we must be given a copy within a reasonable period.
18. The Corporate Trustee Contract Holder confirms that the Corporate Trustee Contract Holder has not been, and is not in the process of being liquidated, dissolved, struck off, wound up or terminated.



## F Declaration and application by the Trustee(s) (Individual/Corporate) (continued)

**THIS SECTION MUST BE READ, UNDERSTOOD AND COMPLETED IN ALL CASES BY EACH TRUSTEE/AUTHORISED SIGNATORY FOR A CORPORATE TRUST.**

### Commission, charges and fees

Commission (Charging Option 1 only)

1. We understand that Old Mutual Isle of Man will pay commission to the financial adviser as indicated in Section D for introducing our business to Old Mutual Isle of Man.

Advice Fee (Charging option 2 only)

1. Where confirmed in Section D, we have agreed to pay an Advice Fee to our financial adviser for providing us with advice to invest the additional contribution in this Plan.
2. We instruct Old Mutual Isle of Man to deduct this Advice Fee from the additional Contribution and to pay this Fee to our financial adviser on our behalf prior to the investment being made with Old Mutual Isle of Man.

Investment Review Fee (Charging option 1 and 2)

1. We understand that any Investment Review Fee that is payable to the financial adviser will also apply to this additional investment.
2. We instruct Old Mutual Isle of Man to disinvest enough of the Portfolio Fund value on the frequency stated and pay this fee to the financial adviser on our behalf for as long as this instruction remains in force.
3. We understand that Old Mutual Isle of Man can only pay this fee on our behalf to the financial adviser providing they have terms of business with Old Mutual Isle of Man and there is no legal or other limitation on disinvestments from the Plan.
4. Should there be a limitation on payment from the Plan then we will pay the financial adviser directly.

### Investment Risk

1. We, the Trustees, acknowledge that, by requesting to make an additional investment into the existing Investment Portfolio+, we accept the investment risk.
2. We have acquainted ourselves with and understood:
  - i. the Assets available, their associated risk ratings and risk factors;
  - ii. the unique characteristics, liquidity constraints, notice periods and risk warnings associated with Assets that invest in alternative investment strategies;
  - iii. all charges taken by Old Mutual Isle of Man, our financial adviser, the Authorised Custodian and, where applicable, the Discretionary Investment Manager.
3. We have been advised, and accept that:
  - i. by asking Old Mutual Isle of Man either directly or through our Discretionary Investment Manager to include an Asset in our Portfolio Fund, we agree to accept the risk that, for any reason whatsoever, management of the Asset may not be in accordance with its objectives and parameters. This includes negligent and fraudulent activity. In addition we accept any risk entailed in any change to such objectives and parameters and that it is our personal responsibility to monitor the funds or deposits in which we are invested. The value of shares and units can fall as well as rise and they, as well as bank deposits and any balance on the Transaction Account held with Old Mutual Isle of Man or the Authorised Custodian, could in exceptional circumstances become valueless either temporarily because of suspension, or permanently. In the event of the insolvency of the Authorised Custodian, any cash held by them may be at risk.  
The fact that Old Mutual Isle of Man may allow or refuse a particular external fund or bank deposit as an Asset does not indicate any judgement by Old Mutual Isle of Man about its investment potential or the propriety of the provider of the Asset.
  - ii. The Investment Portfolio+ may:
    - a. be invested in a variety of Asset classes and, depending on the Assets selected, they may:
      - carry no underlying guarantees; and
      - be at risk of reduction in the value of the capital invested; and
      - have limitations on liquidity.
    - b. invest in Assets which have redemption restrictions applied from time to time. If such restrictions are applied this may significantly delay the processing of encashments, benefits and claims.
  - iii. Past performance of the Assets is not a guarantee for future returns.
4. We understand that investments in the alternative investment strategy funds expose investors to additional risks that are not normally associated with investments in traditional asset class funds and are only suitable for the sophisticated investor who is able to and willing to accept the risks associated with such an investment, including a substantial or complete loss of capital.
5. We may wish to invest into professional/non-retail type investment schemes and, if so, we will make sure that we have had the opportunity to read the offering documents for funds of this nature. Where we decide to invest in professional/non-retail type investment schemes, we accept the levels of risk associated with these, including the risk that the investment into such schemes could result in a loss of a significant proportion, or all of the sum invested.
6. We confirm that we are aware of the fees (if applicable) payable for the chosen investment(s) to be held in the Trustee Contract Holders Investment Portfolio+. We understand that the fees exist partly to meet promotion and distribution expenses of the product, including commission paid to a financial adviser and/or Discretionary Investment Manager.



## **F Declaration and application by the Trustee(s) (Individual/Corporate)** (continued)

**THIS SECTION MUST BE READ, UNDERSTOOD AND COMPLETED IN ALL CASES BY EACH TRUSTEE/AUTHORISED SIGNATORY FOR A CORPORATE TRUST.**

### Country Specific

1. We acknowledge that the Contract shall continue to be interpreted in accordance with and governed by the laws of the Isle of Man and shall comply with applicable South African legislation, rules and regulatory requirements.
2. The Trustee Contract Holder is not a national of or resident in the United States of America or its territories and possessions or in the case of a Corporate Trustee, the Corporate Trustee is not established in the United States of America or its territories and possessions.
3. This/These Contract(s) is/are not available in the United States of America or its territories and possessions, nor is the Contract(s) available to residents of the United States of America or its territories and possessions. Any Corporate Trustee who later becomes established in the United States of America or its territories and possessions will be subject to restrictions placed on the Contract(s).

For the duration of residence or in the case of a Corporate Trustee establishment in the United States of America, these restrictions include the suspension of the ability to buy or sell Assets.

### Data Protection

The Trustee Contract Holder consents to the Trustee Contract Holder's personal data being used in accordance with the Data Privacy Notice.

#### **HOW THE COMPANY USES YOUR INFORMATION**

Details about how we use your information, your rights over this information and how you can exercise your rights can be found in our Privacy Notice. We publish our Privacy Notice on our website [www.oldmutualinternational.com](http://www.oldmutualinternational.com) or you can contact us on +27 (0)21 509 2187 and request a copy. All persons whose details are collected on this form should read the Privacy Notice to understand how the data provided about them will be used.

### Complaint Resolution Process

Old Mutual Isle of Man provides a complaint resolution process which aims to address any dissatisfaction you may have with your transaction. You can write to Old Mutual International Cape Town Service Centre - Old Mutual Wealth building, Mutualpark, Block 1A, Jan Smuts Drive, Pinelands, 7405.

Should the dispute remain unresolved, you can write to The Old Mutual Office of Internal Arbitration at PO Box 80, Mutualpark 7451, email [arbitrator@oldmutual.com](mailto:arbitrator@oldmutual.com) or send a fax to +27 21 504 7700.

You may contact the FAIS Ombud should you have any complaints about the advice you receive or the implementation of your investment.

#### **Postal address**

The FAIS Ombud, PO Box 74571, Lynwood Ridge 0040

Tel: 0860 324 766

Fax: (012) 348 3447

Email: [info@faisombud.co.za](mailto:info@faisombud.co.za)

Website: [www.faisombud.co.za](http://www.faisombud.co.za)

You may contact the Ombudsman for Long-Term Insurance for any long-term insurance related complaints at the following address:

#### **Postal address**

The Ombudsman for Long-Term

Insurance, Private Bag X45, Claremont 7735

Tel: (021) 657 5000

Fax: (021) 674 0951

Email: [info@ombud.co.za](mailto:info@ombud.co.za)

Website: [www.ombud.co.za](http://www.ombud.co.za)



## Complaints & the Isle of Man Financial Services Ombudsman Scheme

### **Our commitment to you**

We at OMLACSA IoM Branch are committed to providing high standards of service and support, but there may still be occasions when you are dissatisfied. We take complaints seriously and want to hear your concerns in order to improve our service further. This document outlines our commitment to you and what you should do if you wish to make a complaint.

### **What should you do?**

You can make a complaint in writing (give address if not in header or footer), by letter or e-mail - [service@omi-int.com](mailto:service@omi-int.com) alternatively you can complain by telephone +27 21 509 2187. You should write down or explain the facts in a logical order and remember to provide your policy number.

### **Not satisfied with our response?**

If you remain unsatisfied once you have reviewed our final response letter you can refer your complaint to the Financial Services Ombudsman Scheme which provides an independent service for consumers with unresolved complaints for eligible complainants. In our final response letter, we will provide you with details of how to contact the scheme, or you can view their website at [www.gov.im/oft](http://www.gov.im/oft).

## Assurance Replacement Policy

These questions must always be answered by the Contract Holder(s).

To 'replace' an existing insurance policy means to terminate or vary an existing insurance policy as a result of cancelling or lapsing it, reducing the premiums, making it paid-up, reducing the term or surrendering the policy in part or in full.

Is this application to replace the whole or part of any of your existing insurance policy with any insurer (i.e. whether the replacement is to occur immediately, to replace an investment that was discontinued in the past four months or that will discontinue in the next four months)?

Yes                       No

If the answer is Yes, the financial adviser must discuss, complete and sign the Replacement Policy Advice Record (RPAR) with the Trustee Contract Holders and attach it to this Application Form.



**F Declaration and application by the Trustee(s) (Individual/Corporate)** (continued)

**THIS SECTION MUST BE READ, UNDERSTOOD AND COMPLETED IN ALL CASES BY EACH TRUSTEE/AUTHORISED SIGNATORY FOR A CORPORATE TRUST.**

**THE TRUSTEE CONTRACT HOLDER CONFIRMS THAT IT HAS / THEY HAVE READ AND UNDERSTOOD ALL DETAILS SUPPLIED IN THE APPLICATION FORM, INCLUDING SECTION G IN ITS ENTIRETY, AND UNDERSTAND ITS IMPLICATIONS.**

**Trustee Contract Holder(s)**

Name										
Signature of Trustee 1		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										
Name										
Signature of Trustee 2		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										
Name										
Signature of Trustee 3		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										
Name										
Signature of Trustee 4		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										

If there are more than four signatories, please attach a copy of this page to the Application.

**Authorised signatories for Corporate Trustee Contract Holder(s)**

Name										
Capacity										
Signature of Trustee 1		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										
Name										
Capacity										
Signature of Trustee 2		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										
Name										
Capacity										
Signature of Trustee 3		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										
Name										
Capacity										
Signature of Trustee 4		Date	D	D	M	M	Y	Y	Y	Y
Country where signed										

If there are more than four authorised signatories, please attach a copy of this page to the Application.



## G Verification of customer identity – financial adviser to complete

### THIS SECTION MUST BE READ, UNDERSTOOD AND COMPLETED IN ALL CASES.

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 suitably certified proof of identity and original or suitably certified verification of residential address.

In certain circumstances, it may be necessary to submit such documentation even if it has already been provided. Outlined below are the standard minimum requirements. In some circumstances we may need additional information.

#### Requirements for a Trust

- 1) A suitably certified copy of the Trust Deed, or extract thereof, showing:
  - a. Evidence of the appointment of the Trustees.
    - i. If changes to the appointed Trustees have been made, proof will be required that the new Trustees are authorised
  - b. Evidence of the appointment of the Protector (For Offshore Trusts - this may be expressed in the Trust Deed)
  - c. Signing powers; this may be expressed in the Trust Deed or a resolution
    - i. Evidence that the Trustees are empowered to provide investment instructions.
    - ii. Signing arrangements.
    - iii. A current authorised signatory list.
    - iv. Specimen signatures of the authorised signatories
    - v. Resolution, if applicable, where only one of the authorised signatories is entitled to sign.
  - d. If any amendments have been made to the Trust Deed, acknowledgment by the Master's Office will be required where applicable.
- 2) For a South African Trust – a suitably certified copy of Master of High Court's Letters of Authorisation (Magtignisbrief) authorising the Trustees to act in that capacity,
  - a. If changes to the appointed Trustees have been made, proof will be required that the new Trustees are authorised; this will be in the form of an amended Letter of Authority by the Master's Office.
- 3) A suitably certified true copy of ID and proof of residential address will be required for all applicable parties in the Trust, namely:
  - a. All of the Trustees
  - b. All the Donors/Settlers
  - c. All the Protector(s) if appointed
  - d. All the named beneficiaries

#### Requirements if the Trustee is a Corporate

- 1) A suitably certified copy of the Certificate of Incorporation or other equivalent official registration documentation.
- 2) Evidence of the registered office and place of business, if different.
- 3) A list of directors' names.
- 4) A current authorised signatory list.
- 5) Specimen signatures and signing power arrangements of the authorised signatories.
- 6) A suitably certified true copy of ID and proof of residential address will be required for the following parties of the Corporate Trustee, namely:
  - a. At least two Directors, one of whom must be an Executive Director
    - I. The manager of the Corporate Trustee Company in South Africa
    - II. The person authorised to establish a relationship or enter into the single transaction on behalf of the Company or Close Corporation
  - b. Shareholders holding of 25% or more of the company shares.
  - c. Those who signed this application (if different from Directors)
- 7) Printout from regulator website or registry to evidence licensed/regulated entity or certificate of good standing – if applicable.

All information should be provided on letterhead.

#### Confidentiality

Any information given by the client(s) or their financial adviser will be used solely by members of the Old Mutual groups of companies.

We require one document from Part A and one from Part B.

Identification documentation should be current and valid. Evidence of address should be the latest available, but no more than three months old.

Please tick (√) to indicate the identification you have supplied for each individual party to the Plan. If a Fund Adviser has been appointed, we may need to verify the identity of the appointee.

Part A	Individual whose identity is being verified
1. Name	<input type="text"/>
Capacity	<input type="text"/>
Type of document	<input type="text"/>
Document reference	<input type="radio"/> Passport <input type="radio"/> National Identity Document
2. Name	<input type="text"/>
Capacity	<input type="text"/>
Type of document	<input type="text"/>
Document reference	<input type="radio"/> Passport <input type="radio"/> National Identity Document



**G Verification of customer identity – financial adviser to complete** (continued)

Part A Individual whose identity is being verified	
3. Name	<input type="text"/>
Capacity	<input type="text"/>
Type of document	<input type="text"/>
Document reference	<input type="radio"/> Passport <input type="radio"/> National Identity Document
4. Name	<input type="text"/>
Capacity	<input type="text"/>
Type of document	<input type="text"/>
Document reference	<input type="radio"/> Passport <input type="radio"/> National Identity Document

Part B Individual whose identity is being verified				
<b>These must be no more than three months old</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
1. A recent utility, rates or council tax bill (cell phone bills are not acceptable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. A recent mortgage statement, evidencing the residential address	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. A state pension, benefit or other government produced document showing benefit entitlement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. A recent tax assessment document	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. A recent account statement from bank or credit card (store cards not acceptable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Proof of ownership or rental of the residential address	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Part C Financial crime – risk rating**

To prevent financial crime, Isle of Man regulated entities may adopt a 'risk-based approach' when obtaining evidence of the origin of a client's wealth. In order to speed up the application process, we have provided you with the table below to allow you to find out your client's risk rating before submitting the Additional Investment Form to us. We highly recommend that you complete the risk rating as it allows you to determine if you need to enclose further documentary evidence with the Additional Investment Form or not. If we do not receive the necessary documentary evidence with the Additional Investment Form, then it will take longer to process the additional investment.

Please refer to the Origin of Wealth Guidelines (available on our website [www.oldmutualinternational.com](http://www.oldmutualinternational.com)) for information on how to complete the table below.

In order to decide what risk rating applies to your client's investment, you need to take into account the following factors:

- The Trustee(s)' country of residence
- which country the Contribution is paid from
- (a) + (b) = total risk rating

Applicant(s)	Trustee country of residence (a)	Country of Contribution funding (b)*	Total risk rating
Example	South Africa (1)	Mauritius (2)	(3)

\* If paying from multiple jurisdictions, the country of funding rating needs to reflect the highest rated country.

**Old Mutual Isle of Man reserves the right to request further documentation if it is felt appropriate.**

Please note that each new application, or application for an additional investment, will be reviewed individually. If you are unsure about a particular application, please contact your Offshore Specialist or your local office.

**Financial adviser declaration**

**Please ensure that the Declaration in section A below is signed and dated.**

Complete the relevant sections as detailed below:

- |   |   |
|---|---|
| Financial advisers                            | - Complete sections A, B.1 and C as appropriate |
| Old Mutual PFA (Personal Financial Advice)    | - Complete sections A, B.2, and C               |
| Old Mutual International Offshore Specialists | - Complete sections A and B.2                   |



**G Verification of customer identity – financial adviser to complete** (continued)

A Declarations – Must be completed by the financial adviser, Old Mutual PFA or Old Mutual Offshore Specialist

I declare that:

- I have verified the contents of the original documents where copies have been enclosed and confirm that they are true copies of the originals.
- I have taken reasonable steps to make sure that the funding is legitimate and in line with the client's circumstances.
- To the best of my knowledge and belief, all the information provided in and with this Additional Investment Form is true and complete and was obtained from the Trustee Contract Holder(s) who is/are of good standing. I also confirm that I will provide further information if required.
- I have not made any changes to the Additional Investment Form after the Trustees have signed it.

I confirm that I gave advice concerning this investment to the Trustee Contract Holder(s) in  country

on

I confirm that, if applicable, all information was received directly from the Trustee Contract Holder(s).

Signature of financial adviser

Date

Country where signed

B To be completed by financial adviser

**B.1 Old Mutual Broker Division**

Broker Consultant name

Broker Consultant number

**B.2 Old Mutual International Offshore Specialist** (if known)

Specialist name

Location (Town and Country)

Code

C To be completed by Old Mutual PFA only

Information supplied by financial adviser (All information provided is for Old Mutual PFA use only and is not part of the Contract)

Name(s) of introducer(s) (If Independent Contractor, include address)	Codes Sales Centre	% Split Intermediary			Commission	Figures



**INTERNATIONAL**

www.oldmutualinternational.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 4EA, 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 Life Assurance Company (South Africa) Limited is incorporated in South Africa (reg. number: 1999/04643/06). Registered office: Mutualpark, Jan Smuts Drive, Pinelands, Cape Town, South Africa. Old Mutual Life Assurance Company (South Africa) Limited is a registered long-term insurer and a licensed financial services provider.

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