

Old Mutual International Investment Portfolio+

Authorised Custodian and Funds Application

Individual Investor

February 2024

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

Financial adviser's details

Adviser name	
Company name	
E-mail	
OMLAC(SA) code (if applicable)	
OMI Adviser code	
Contact person	
Contact number	
FAIS licence number	
Offshore Specialist	

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.

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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 form should be read & understood and 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 K 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>

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	\circ	Fema	ale									
E-mail address (mandatory)														
Marital Status	\bigcirc	Divo	rced	N	larried	\bigcirc	Single	\bigcirc	Wido	wed	\bigcirc	Legal	ly sepa	arated
Date of birth	D	D	М	Μ	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)														
Descen for Investment	\bigcirc	Dive	rsifica	ation o	of asse	ts	🔵 Sa	ving	for the	futu	re	\bigcirc	Savin	g for retirement
Reason for Investment		Esta	te pla	nning			() 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 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 (√)	Employed Self-Employed Retired	Unemployed								
	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										
	Postcode									
Country										
Date of retirement/Date of unemployment (If applicable)	e) D D M M Y Y Y Y									
Industry or Nature of Business: (incl previous Industry if Retired or Unemployed)										
Administrative and Support service Agriculture/Forestry	and O Animals & Conservation O Arms Manufacturers O Art/Antio and Dealers O Dealer	que/Jewelry								
Arts/Entertainment Atomic/Nuclear pov and Recreation	er Construction and Infrastructure Cryptocurrency Assets Design 8	& Architecture								
C Education/Healthcare C Energy & Solar and Social work	Financial, Insurance and Banking Gambling Industry (Casino, slot machines, Hospital betting)	lity								
Information/ Communication, Me and Technology	dia C Manufacturing (Import/ Manufacturing (Import/ Marketir Export) (Non-Import/Export) Aarketir	ng/Advertising								
Mining: Extraction of precious metals and minerals Motor trade/dealers	ip Private Military Contractors Professional Services O Public S and Safe	ector: Defence ety								
Public Sector: Procurement, Infrastructure and Administration Public Sector: Real Estate: Development, Sales and/or Letting	Regulated/Registered Science and charities/NPO/NGO Laboratories	netal Dealer								
Trades & Service Transporting, Storag and Logistics (exclusion imports/exports)		ale and Retail								
Other:										
Position (incl previous position held if Retired or Unemp	oyed)									
Managing director/CEO Executive management/Dire	tor O Senior management O Non-senior O General Emplo									
High ranking officer Senior Governmen official (e.g., Judge, Magistrate, Politicia	ı)									
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	N	larried	\bigcirc	Single	\sim	Wido	wed	\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)														
Reason for Investment		Diver	sificat	tion of	fassets	. (Sav	ving f	or the	future	;	\bigcirc	Savin	g for retirement
		Estate	e plan	ning		(Oth	ner:						

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 Ves	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 2		
Employment Status (√)	Employed Self-Employed Retired	Unemployed
	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		
	Postcode	
Country		
Date of retirement/Date of unemployment (If applicable)		
Industry or Nature of Business: (incl previous Industry if Ref		
Administrative and Support service Agriculture/Forestry and Fishing	Animals & Conservation Arms Manufacturers and Dealers	Art/Antique/Jewelry Dealer
Arts/Entertainment Atomic/Nuclear power generation	Construction and Infrastructure Cryptocurrency Assets	O 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	O Manufacturing (Import/ O Manufacturing (Non-Import/Export)	Marketing/Advertising
Mining: Extraction of precious metals and minerals Motor trade/dealership	 Private Military Contractors Professional Services 	O Public Sector: Defence and Safety
Public Sector: Procurement, Infrastructure and Administration Product Administration Real Estate: Development, Sales and/or Letting	C Regulated/Registered Charities/NPO/NGO C Science and Laboratories	Scrap metal Dealer
Transporting, Storage and Logistics (excluding imports/exports)	Unregulated/ Unregistered charities/ Utilities NPO/NGO	Wholesale and Retail trade
Other:		
Position (incl previous position held if Retired or Unemploye	(k	
Managing director/CEO Executive management/Director	◯ Senior management ◯ Non-senior ◯ ◯	General Employee/ 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	Y	Υ	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	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	Y
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 ($\sqrt{$)



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	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	intry						
	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						
	Post	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	Υ	Υ	Υ
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	Y	Y	Y	Y
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 ($\sqrt{}$)



Overall Wealth

C1

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)

Source of Income

Income

C2

If you are retired or unemployed, please provide details of your salary/income prior to retirement or unemployment commenced. Income from current Employment: Please give an indication of the last year's combined (where applicable) salary/income/bonus:

Salary/Income:	Bonus:	Your additional annual income	Description of additional annual income and amount in relevant currency
<r></r>	<r500,000< td=""><td></td><td></td></r500,000<>		
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		

Source of Funds - Activity generating the contribution of the Investment

Please note: 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	М	Mor	iths	
	Name of company/financial institution (e.g. Investment house or insurance company)									
	Name of person who held the investment									
\sim .	Investment/policy number									
Investment/insurance	Total amount paid out (specify currency)									
	Date liquidated	D	D	Μ	Μ	Y	Y	Y	Y	
	How long was the investment/policy held for?	Y	Y	Year	S	Μ	М	Mor	iths	



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

Please note: 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	Υ	Y	Υ	Υ	
	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	М	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)									
	Date received	D	D	М	М	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)							1	1	
	Date of sale	D	D	М	М	Y	Y	Y	Y	
	Amount received from sale (specify currency)									1
	Date received	D	D	М	М	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	Υ	Y	Υ	Υ	
	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									
	Relationship to company									
Loan/loan repayment	Amount received (specify currency)									
	Date received	D	D	М	М	Y	Y	Υ	Y	
	Name of company/financial institution									
	Name of person who held the pension									
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.

I live(d) in that country	I work(ed) in that country	My family live in that country	I travel to that country	I do business in that country	I own property in that country
I need it for tra (provide a reason	ansaction purposes n why this country was cl	nosen)			

) Other (please provide a reason if other is selected)



C3 Bank details funding the contribution

									•																
Payment amount										Payr	nen	t cu	irrend	су											
Bank name																									
Bank address																									
	Postco	de																							
	Countr	У																							
Account holder's name (as stated on bank account)																									
SWIFT or BIC Code** (If applicable	e)																	t code			-			-	
Bank account number/IBAN*																									
Bank account currency																									
* IBAN stands for International B ** A sort code is used in the UK in number. A BIC code is used in Europe in co	conjunc onjunctio	ction on w	with ith ar	a bai n IBA	nk a N.	accou	int nu	ımbe	r. A \$	SWIF	T co	de	is use	ed o	utsi	de E	urop	e in c	onjui	nct					
Foreign Exchange (FX) (Plea				ectio	on i	s cor	mple	ted v	whe	ere a	n F	Хр	rovid	ler i	s us	sed	and	diffe	rs to	b th	ne ba	nko	deta	iled	above).
Premium being paid using ar	ר FX pro	ovide	er (
Bank name																									
Account opened to facilitate	tax clea	rand	ce an	ıd cı	urre	ency	conv	ersic	on, t	here	efor	e ac	ccoui	nt c	deta	ails a	are r	not ki	nowi	n.					
(b) Payment from third-party	/																								
Third-party payments, such a may accept payments in the Please ensure that any third p	follow	ing s	situa	tion	s ar	nd w	ith t	he fo	ollo	wing	g ad	dit	ional	do	cur	mer	ntati	on. P							
Payment from an ac Copy documentation (Note: payment from	n showi	ng c	detai	ls of	the	e inve	estm	ient a	and	the	pay	/me	ent ti	rans	sfer	ma	ay be	e req	Jest						
Name of financial institution																									
Country																									
Payment by one spo The Payor's valid pas section (a) above. So	sport o	r nat	tiona	al ide	enti	ty ca	rd p	lus re	esid	enti							Plea	se co	mpl	ete	e the	Pay	or's	det	ails in
For each individual payor, yo of residential address.	ou will	nee	d to	prov	/ide	e a c	ertif	ied c	opy	/ of	the	val	lid pa	ass	por	t or	' nat	iona	ide	nti	ity ca	ard a	and	evi	dence
Payment from an ex A letter (or certified or copy of correctly certified or copy of certified or copy of correctly certified or copy of certif	copy) fr	om t	the e	execu	uto	r cor	nfirm	ing t	the	sou	rce	of f	unds												
Name of Executor																									

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



Contribution

Please note: You will be allocated 1 000 Contracts which is the maximum number allowed.

Curre	ency (√)	A	nou	nt											
\bigcirc	US\$														
\bigcirc	£														
\bigcirc	€														
\bigcirc	CHF														
\bigcirc	AU\$														
\bigcirc	Or enter the ZAR amount														

Minimum initial investment amounts

- Direct Funds/Model Portfolios £ 15,000 or 20,000 for other currencies (except ZAR)
- Authorised Custodian Facility £ 60,000 or 75,000 for other currencies (except ZAR)

Contract Currency

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

Contract Currency $(\sqrt{})$



The Contract Currency cannot be changed once the Contract has been issued.

Your Contract valuation will be summarised in your chosen Contract Currency.

If you choose a Contract Currency other than that in which you made your Contribution, you should be 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.

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.

Е

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.

We will charge a Custodian Access Fee depending on the account you choose.

FINANCIAL ADVISER COMMISSION AND FEES

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.

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)

In	iti	al	fe	es
		_		

Charging option 1	OR	Charging option 2	
Initial Commission payable to your financial a	dviser	Initial Commission payable to your financial adviser	
Maximum of 3% of your contribution ar be automatically added if applicable.)	nount. (VAT will	Subject to a maximum of 3% (VAT will be autom added if applicable.)	atically
		 The Advice Fee is an amount that you have age to pay your financial adviser for providing you advice. This amount will be deducted by Old Mutual I of Man on your instructions prior to investing Contribution on the Contract Commencemer and is based on your Contribution. For clarity, the Advice Fee is not a commissior payment paid by Old Mutual Isle of Man. Please note that option 2 is not available for specie transfers. 	with Isle the nt Date
		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

Please confirm the o the remaining contrib	DTH Authorised Custodian Facility and Direct Funds/Model Portfolios section below and Sect currency and % to be held in the Authorised Custodian Facility in the table below. boution to be invested as per the funds indicated in the Direct Funds/Model Portfolios section Portfolios/Authorised Custodian Currenc: Name Currenc: Currenc: Currenc: Currenc: Currenc: Currenc: Currenc: Currenc: Currenc: Currenc:	below)
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Please confirm the	currency and % to be held in the Authorised Custodian Facility in the table below.	
		ions G/H/I & LO
	vided the \pm 1,000 (or 1,500 for other currencies) minimum investment amount per Direct Fur	
	rrencies) being invested in the Authorised Custodian Facility.) for other currencies) minimum for Direct/Model Portfolios will not apply to a Plan that holo	ls the Authoris
	Facility and Direct Funds or Model Portfolios can be held within the same Plan subject to a min	imum of £60,00
Combination fr	om Authorised Custodian Facility, Model Portfolios and/or Direct Funds	
each stock to be tra	nsferred has a value greater than \pm 5,000 (or currency equivalent)	
ou can only transfer the total value of ass	assets in: sets is more than £ 60,000 (or currency equivalent) in total, and	
	ecognised by Old Mutual Isle of Man. Old Mutual Isle of Man will confirm to you when the asse ponsibility to start and monitor the transfer process.	transfer proce
All assets to be transfer	red will be reviewed and are subject to Old Mutual Isle of Man acceptance. All stocks and share	s must be quote
\frown	et Statement required)	
	ansfer to Old Mutual Isle of Man	
	tribution payment method ($$)	
	Ithorised Custodian Facility section below and applicable Sections H, I & Letter of Authority (L	OA).
. O <u>Authorised Cus</u>	stodian Facility .h an initial Contribution of at least £ 60,000 or 75,000 for other currencies.	
	nent Portfolio+ Fund list for relevant Fund Codes.	
lease refer to investm	rect Funds/Model Portfolios section below ONLY and Section G.	
Please complete Dir	h an initial Contribution of at least \pm 15,000 or 20,000 for other currencies.	

* Please provide the asset statement containing the asset name, Sedol/ISIN Number/Book Value/units & custodian currency. (Please complete sections H & I & Letter of Authority)

^{***} 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. This Transaction Account is a non-interest bearing account and therefore no interest will be paid for any cash balance. 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 depletion in the Transaction Account, a switch into the Transaction Account is required to replenish the funds available for charges.



L

Appointing a Model Portfolio Manager

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

G

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 Plan (refer to the Investment Portfolio+ General Conditions).

Request to open an Authorised Custodian account – Authorised Custodian Facility ONLY

For an up-to-date list of Authorised Custodians that we have terms of business with, please go to www.omi-int.com, click on Investment Portfolio+ and then select the Investment Portfolio+ Investment Choices Brochure.

We strongly recommend you complete your own due diligence on the Authorised Custodian, seeking advice if necessary, before you request us or the Reinsurer to appoint them, to ensure they satisfy your requirements. Full details of the Authorised Custodian and services can be found on the Authorised Custodian's own website.

The fact that we may allow or refuse a particular Authorised Custodian does not indicate any judgement by us about its financial stability, services or suitability for you.

Appointment of Authorised Custodian

I request that Old Mutual Isle of Man or the Reinsurer appoints with the intent that the Authorised Custodian shall be responsible for the safe custody of Assets.

On appointing the Authorised Custodian, I request that the Authorised Custodian be permitted to discuss transactions with my appointed financial adviser.

Internet Request (Authorised Custodian Facility)

Where the Authorised Custodian offers online services, we may, on your request, authorise view-only access to certain parties. (If not ticked, automatic access will be provided).

Does applicant 1 require view-only access to the Internet Service provided by the Authorised Custodian?	O Yes	🔵 No
Does applicant 2 require view-only access to the Internet Service provided by the Authorised Custodian?	O Yes	🔵 No
Does the applicant(s) require their financial adviser to have view-only access to the Internet Service provided by the Authorised Custodian?	O Yes	🔵 No
Does the applicant(s) require a Third Party to have view-only access to the Internet Service provided by the Authorised Custodian?	O Yes	🔿 No

Details of 1st Third Pa	rty requiring access	Details of 2nd Third Party requiring access					
Title (√)	Mr Mrs Miss	Title (√)	Mr Mrs Miss				
	Other:		Other:				
Full forename(s)		Full forename(s)					
Surname		Surname					
Address		Address					
	Postcode		Postcode				
Telephone number		Telephone number					
E-mail address		E-mail address					



Appointing a Discretionary Investment Manager – Authorised Custodian Facility

A Discretionary Investment Manager is a person or firm which acts as your agent and provides investment advice to you, or is able to act on your behalf under a discretionary mandate and which gives investment instructions to the Dealing Desk.

\bigcirc I			have not appointed a Discretionary Investment Manager and I will act on an
\bigcirc I	Contrac	t Holder's name	"execution only basis".
	 This means that I, as Desk. 	s the Contract H	older, will issue dealing instructions directly to the Authorised Custodian's Dealing
	(You do not need to cor completed)	mplete the rest of	this section, but please ensure the Letter of Authority at the end of the Application Form is
OR			
	Contract	t Holder's name	appoint my financial adviser as indicated on page 1 of this Application Form to act as my Discretionary Investment Manager (must be appropriately FAIS licensed – Category II)
	 Financial advisers ad the Discretionary Ma 	0	onary Investment Managers cannot choose both the Investment Review Fee and
OR			
	Contract	t Holder's name	appoint a Third Party, which may be a company linked to the Authorised Custodian, to act as my Discretionary Investment Manager as specified below.
Name	Contract of Discretionary tment Manager firm	t Holder's name	
Name Invest	of Discretionary	t Holder's name	
Invest	e of Discretionary tment Manager firm act person	t Holder's name	
Name Invest Conta	e of Discretionary tment Manager firm act person	t Holder's name	
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Name Invest Conta	e of Discretionary tment Manager firm act person	t Holder's name	
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Discretionary Manager Fee

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

VAT to be added:	🔵 Yes	O No
(If not ticked Vat will	not be add	ed.)

Discretionary Manager Fee starting on

If the amount to be paid is below the minimum partial encashment amount then Old Mutual Isle of Man will accrue the calculated value and pay the Discretionary Manager Fee at the earliest opportunity following the next Quarterly Date on which the minimum partial surrender is met.



Acceptance of appointment

I, the authorised signatory for the Discretionary Investment Manager named above, agree that:

- The Discretionary Investment Manager has the necessary regulatory permission to carry out this activity and will inform Old Mutual Isle of Man and the Contract Holder if this stops being the case. For example, in South Africa this would be a licensed Discretionary Financial Services Provider or an authorised member of the Johannesburg Stock Exchange Limited;
- 2. The Discretionary Investment Manager will be responsible to the Contract Holder for investment decisions in relation to the Investment Portfolio+ or certain assets in the Investment Portfolio+ depending on the licence conditions of the Discretionary Investment Manager (e.g. Johannesburg Stock Exchange Authorised Investments);
- 3. The Discretionary Investment Manager has obtained and read a copy of the Investment Portfolio+ General Conditions to familiarise themselves with the responsibilities and requirements of those Investment Portfolio+ General Conditions and agrees to act in accordance with them at all times as applicable;
- 4. Where the Discretionary Investment Manager is subject to South African regulation, the Discretionary Investment Manager and Contract Holder confirm:
 - i. a Mandate has been agreed and signed by the Contract Holder;
 - ii. the Mandate authorises the above-named Discretionary Investment Manager to act on behalf of the Contract Holder with full discretion;
- 5. I have completed the Letter of Authority form (on pages 22-24) which, once completed by Old Mutual Isle of Man or the Reinsurer, provides the 'Authorised Individual' to give instructions to the Authorised Custodian subject to the terms and conditions specified in the Letter of Authority;
- 6. The Discretionary Manager Fee will be taken as a partial surrender in accordance with the Investment Portfolio+ General Conditions. If the amount to be paid is below the minimum partial encashment amount then Old Mutual Isle of Man will accrue the calculated value and pay the Discretionary Manager Fee at the earliest opportunity on the Quarterly Date on which the minimum partial surrender is met, subject to point 7 below;
- 7. If the Plan is in the Restricted Period as defined in the General Conditions and no further encashments are allowed at that time, then payment of any outstanding Discretionary Manager Fee will have to be paid directly by the Contract Holder.

Name of Discretionary Investment Manager firm							_
		5.					
Signature		Date	D D M	MY	Y	YYY	
Name of signatory							
Position							



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

TAX RESIDENCY DETAIL

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.

		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 INCLUDING THE LETTER OF AUTHORITY (AUTHORISED CUSTODIAN FACILITY ONLY) AND SECTIONS K, L & M 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	М	М	Y	Y	Y	Y
Country where signed									
Signature of applicant 2 (If any)	Date	D	D	М	М	Y	Y	Y	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 J above, attach the details with this Application Form and tick here ($\sqrt{$



Postal:

Κ **Data Privacy Notices**

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:

- (a) Underwriting;
- Assessment and processing of claims; (b)
- 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:	inforeg@justice.gov.za
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.



Financial Adviser Declaration

Conflict of interest disclosure notice

Old Mutual and our financial advisers have a duty to act in your, the clients', interest when you are the recipient of our financial advice. Not only should we be objective and professional, but we must also to 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:

I am aware and understand the contents of the Data Privacy Notices and the Conflict of Interest Disclosure Notice.

- 1. I have established and verified the identity of my client in accordance with the Financial Intelligence Centre Act and its regulations.
- 2. I have taken reasonable steps to make sure that the funding is legitimate and in line with the applicant's circumstances.
- 3. 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.
- 4. I have not made any changes to the Application Form after the applicant(s) has signed it.
- 5. 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).

6. 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).

Signature of financial adviser								
Date	D	D	М	М	Υ	Υ	Y	Υ

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OMI/IP+FAI1/0224



M 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.



Acceptable documents

- · 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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Old Mutual International Investment Portfolio+ Letter of Authority – Authorised Custodian Facility ONLY

Date

D D M M Y Y Y Y

Dear

Name of Authorised Individual (who could be either the Discretionary Investment Manager or the Applicant) Name

Name of Custody Service Provider - the 'Custodian'

Investment Portfolio+ Restricted Letter of Authority

Reference is made to the following accounts (the 'Accounts')

Old Mutual Isle of Man to insert the Account Number(s) of the Account(s) opened with the Custodian								
Old Mutual International Investment Portfolio+ Number:								
	Cash	Custody						
Custodian Account Numbers								

Old Mutual Isle of Man hereby authorises the 'Authorised Individual' to give instructions to the 'Authorised Custodian' in respect of the Accounts, subject to the terms and conditions of this Letter of Authority.

This Letter of Authority authorises the Authorised Individual to carry out any of the following actions in respect of the Accounts (designated with the above-referenced Investment Portfolio+ number) opened by Old Mutual Isle of Man with the Authorised Custodian:

- i. to obtain details of cash balances and safe custody holdings on the Accounts; and
- ii. to give instructions to acquire, sell and otherwise dispose of for value investment assets (subject to the investment restrictions set out herein (the 'Investment Restrictions') and as may be changed by Old Mutual Isle of Man from time to time) any such acquisition or proceeds of disposition to continue to be held for the benefit of the Accounts.

PROVIDING that, and for the avoidance of any doubt, this Letter of Authority does not extend to or give authority to the Authorised Individual to:

- i. Give instructions in respect of Assets that are not permitted by the Investment Restrictions
- ii. Withdraw money or securities from the Accounts
- iii. Pledge any money or security in the Accounts
- iv. Overdraw an Account(s) or issue any form of credit line or borrowings against the Accounts
- Issue or use a cheque book on the Accounts or V.
- Represent Old Mutual Isle of Man at shareholders' meetings. vi.

The Investment Restrictions specify certain classes of Assets which can and cannot be held within the Accounts. These restrictions are made for administrative and/or regulatory reasons only and do not reflect any guidance from Old Mutual Isle of Man on risk or potential performance. The Authorised Individual is responsible for his or her choice of investment, not Old Mutual Isle of Man. The value of the Investment Portfolio+ referenced above is linked to the value of the Assets held within the Accounts.

INTERNATIONAL



Investment Restrictions

Permitted investments

- · Regulated Collective Investment schemes from the following jurisdictions:
- UK Authorised Unit Trusts/ OEICs
- · UK Authorised Investment Trusts
- · FSA Recognised funds in other jurisdictions
- Funds with UCITS status
- · Luxembourg SICAVs, Fonds Commun de Placement (FCPs) and SIF Schemes
- Exchange Traded Funds (providing the exchange is one Old Mutual Isle of Man deals on)
- Irish Collective Investment Schemes
- Isle of Man Collective Investment Schemes
- EU Registered Funds
- · Channel Islands Collective Investment Schemes
- Australian Mutual Funds
- Swedish Funds
- Cayman Islands Mutual Funds
- BVI Public Funds
- · Bermuda Collective Investment Schemes
- Bahamas Collective Investment Schemes
- Singapore Unit Trusts
- Hong Kong Unit Trusts
- Mauritius Collective Investment Schemes
- Gibraltar Collective Investment Schemes
- Malta Collective Investment Schemes
- Luxembourg SICAV SIF

Other Securities

- Equities/stocks on a stock exchange recognised by Old Mutual Isle of Man.
- · Bonds with minimum rating of Baa3 (Moody's)/BBB- (Standard & Poors) and that a regular secondary market exists inorder to sell holdings.
- Medium Term Notes providing the Issuer of the Notes is rated at least Baa3 (Moody's)/BBB- (Standard & Poors) or higher and that a
 regular econdary market exists in order to sell holdings.
- Medium Term Notes or Bond products issued by any of the following five banks are permitted and Investment Grade requirements do not apply: ABSA, Standard Bank, First Rand, Nedbank and Investec.
- Exchange Traded Commodities (providing the exchange is one Old Mutual Isle of Man deals on).
- · Certificates providing the Issuer of the Certificate is rated A or higher and that a regular secondary market exists in order to sell holdings.
- · Cash deposits, provided the institution has a credit rating of at least A.

The following types of investments are expressly NOT permitted

- Securities with excessive charging/commission structures. In particular funds which pay>4% initial commission to brokers and/or entry/ exit penalties>5%
- Funds that can borrow cash of more than 100% of the NAV
- · Illiquid assets, i.e. where the price or dealing point is not readily available
- · Assets where no accurate value can be established on at least a quarterly basis
- · Commodities
- · Gold and precious metals
- · Options/Derivatives including futures, currency forwards, short selling, Covered Warrants
- Private company shares
- · Shares in Old Mutual PLC and an interest in whatever form in any Old Mutual Group company
- · Contingent liability transactions

Old Mutual Isle of Man may change the Investment Restrictions from time to time.

This Letter of Authority is personal to the Authorised Individual and is given without right of assignment or substitution; therefore the Authorised Individual may not assign this Letter or appoint another party to act in their place. This Letter of Authority shall remain in force until such time as Old Mutual Isle of Man revokes it in writing.

This Letter of Authority shall be governed by and construed in all respects in accordance with Isle of Man law and the parties agree to submit to the non-exclusive jurisdiction of the Isle of Man Courts as regards any claim or matter arising in relation to this Letter of Authority.

Old Mutual Isle of Man is not responsible for the acts or omissions of the Authorised Individual. Accordingly, Old Mutual Isle of Man is not responsible for any reduction in the value of the Accounts arising directly or indirectly from the Authorised Individual's instructions.

Old Mutual Isle of Man is not responsible for any adverse tax effects suffered at any time by the Contract Holder.



It is the Authorised Individual's responsibility to ensure that, at all times, they act within the limits of this Letter of Authority and, in particular, in accordance with the Investment Restrictions. Old Mutual Isle of Man accepts no responsibility or legal liability whatsoever for loss, damages or expenses which the Authorised Individual or any other party may suffer or incur directly or indirectly as a result of the Authorised Individual acting outside the limits of this Letter of Authority.

The Authorised Individual undertakes at all times fully and effectively to indemnify Old Mutual Isle of Man from and against all present or future liabilities, losses, charges, costs, claims, demands and expenses howsoever arising as a consequence of a breach by the Authorised Individual of the terms and conditions of this Letter of Authority and, without prejudice to the generality of the foregoing, of the Investment Restrictions set out herein or as may be notified to the Authorised Individual from time to time by Old Mutual Isle of Man.

ACKNOWLEDGEMENT AND ACCEPTANCE (PLEASE SIGN TWO COPIES OF THIS LETTER, RETAIN ONE FOR YOUR RECORDS AND **RETURN THE OTHER TO OLD MUTUAL ISLE OF MAN)**

I have read this Letter of Authority and, by signing and delivering this Letter of Authority as a Deed, I acknowledge, accept and agree to be bound by the terms and conditions hereof and to provide the indemnity set out herein.

IN WITNESS WHEREOF the Authorised Individual has executed this document as a Deed at the date below.

Authorised Individual – Natural Person

Name of Authorised Individual		Signature
DATE	D D M M Y Y Y	
Name of Authorised Individual		Signature
DATE	D D M M Y Y Y	

OR

Authorised Individual – Limited Company

EXECUTED and **DELIVERED** AS A DEED by

Full name of Company	
acting by:-	
Director name	Signature
Director/secretary name	Signature
DATE	D D M M Y Y Y Y

Signed for and on behalf of Old Mutual Isle of Man

Name of Authorised Signatory									Signature	2
Name of Authorised Signatory									Signature	
DATE	D	D	Μ	М	Y	Y	Y	Y		

Signed for and on behalf of Custodian (acknowledging receipt)

Name of Authorised Signatory										e
DATE	D	D	М	М	Y	Y	Y	Y		