Useful information about your PPS Tax Free Investment Account Application Form



Contact details

Email: admin@ppsinvestments.co.za Tel: 0860 468 777 (0860 INV PPS) Fax: 021 680 3680

Website: www.pps.co.za/invest

Cut off and timelines

- All complete and valid instructions received before 14:00 on a business day will be processed on the same day.
- Complete and valid instructions received after 14:00 will be processed on the next business day.
- Investments will be processed and finalised within a maximum of five (5) business days.
- Any errors are to be reported within **fourteen (14) days** of your new business confirmation being received.

Useful information

Please refer to our website www.ppsinvestments.co.za for:

- · Product brochures and key benefits.
- Fund fact sheets (Minimum Disclosure Documents) for each of the available Investment Option(s).
- · Financial Intelligence Centre Act (FICA) requirements.
- The Effective Annual Cost measure (EAC) is an industry-wide disclosure standard. It can be used by investors and financial advisers to compare charges on most retail investment products, and their impact on investment returns, so that investors are placed in a better position to make informed decisions around investment choices. The EAC is a measure of the charges that an investor will likely incur in purchasing and holding a financial product, and does not attempt to measure the features of a financial product.
- · The latest Product Terms, Conditions and Declarations.
- You can manage your investment, view balances, transact and download tax certificates on the PPS Investments Secure Online Services website (www.ppsisecure.co.za) or the PPS for Professionals mobile app for IOS or Android.

Consider getting financial advice

PPS Investments does not provide financial advice. However, we believe in the merits of good financial advice. If you are not comfortable making your own investment decisions, consider using the services of a PPS Investments accredited financial adviser.

Contributions

- You must make sure your annual payments across all approved tax-free savings accounts with all product providers do not exceed the annual and life time contribution limits. The limits apply with regards to total contributions across all product providers and not on a per product provider
- If you exceed your annual contribution limit of R36 000 (as stipulated in the Income Tax Act) this will lead to a penalty tax of 40% on the over contributed amount. This penalty will be imposed by the South African Revenue Service ("SARS") at the end of the tax year.
- If you contribute more than the lifetime contribution limit of R500 000 (as stipulated in the Income Tax Act), this will lead to a penalty tax of 40% on the over contributed amount. This penalty will be imposed by the South African Revenue Service ("SARS") at the end of the tax year.

Investment Options

The Investment Option(s) for the OPN Tax Free Investment Account (TFIA) are restricted by legislation. No funds that charge performance fees can be offered. Please refer to the Select Investment Option Schedule for the full list of available funds. This also applies to Customised Solutions.

Document checklist and supporting documents

Please send through these documents with your application form to admin@ppsinvestments.co.za or fax 021 680 3680:

A copy of your South African barcoded ID/smart card, valid passport (if foreign national), valid drivers license or unabridged birth certificate (if minor).

Proof of your residential address, not older than three (3) months, (e.g. bank statement, utility bill or telephone account).

Proof of deposit.

If unit transfer - copy of current investment statement indicating Investment Option(s) and fund classes.

PPS TAX FREE INVESTMENT ACCOUNT APPLICATION FORM



PROFESSIONAL PROVIDENT SOCIETY INVESTMENTS PROPRIETARY LIMITED ("PPS INVESTMENTS")
CLIENT SERVICE CENTRE CONTACT DETAILS
TEL: 0860 468 777 (0860 INV PPS)
EMAIL: admin@ppsinvestments.co.za

FAX: 021 680 3680 WEBSITE: www.pps.co.za/invest

Name and surname

Telephone number Email

Capacity

B PERSONALISED INVESTMENT NAME

You have the opportunity to name your investment (e.g. "My Holiday Fund").

Name my investm	ent			
Please note that the p	product does not guarantee	performance in line with your pers	sonalised investment name.	
C PERSON	AL DETAILS OF IN	VESTOR (only natural	persons who are resident	in South Africa for tax purposes)
Title	Surname			
First name(s)				
Date of birth		Identity or pa	ssport number	
Country of birth		Country where	e passport issued	
Gender	Male	Female		
Nationality	South African	Other (Please specify)		
Occupation			Member number	
Physical address				
				5
				Postal code
Postal address				
				Postal code
Telephone number (home)			Telephone number (wo	ork)

D TAX INFORMATION

Tax Regulations require us to collect information about each investor's tax residency. In certain circumstances we may be obliged to share information on your account with SARS. Should any information provided change in the future, please ensure you advise us of the changes promptly.

Fax

Tax residency

Cellphone number

Email address (Compulsory)

Are you a South African resident for tax purposes? Yes No If yes, please provide your tax number Are you a tax payer anywhere else? If so, please complete the table below:

Country / Countries of tax residence	Tax Identification Number (TIN)	

If you are unable to provide a Tax Identication Number, please select one of the reasons below:

My tax authority does not require me to provide a TIN/FE (does not apply to South African or United States tax residents).

My country does not issue TIN/FE to its tax residents (does not apply to South African or United States tax residents).

I am unable to obtain a TIN/FE (please provide a reason).

Are you a "US Person"?

Do you have a United States tax number, residency or citizenship?

If PPS Investments identifies, through the information provided on this application form, that you are considered a US person or have a Reportable

Account, from any other country you may be required to submit further documents.

E ACTING ON BEHALF OF THE INVESTOR

E1. Legal guardian, parent, persons acting on behalf of investors. Proof to be sent to PPS Investments.

Title Surname

First name(s)

Identity or passport number Relationship to investor

E2. Mandate for dealing with the discretionary FSP acting on behalf of the investor. Please send us a copy of the signed mandate.

I have entered into a discretionary mandate with a FAIS category II FSP.

Full Limited

I authorise PPS Investments to accept instructions submitted by the FSP on my behalf. Please send us a copy of the mandate. Yes No (Please send us a copy of the signed mandate).

F LUMP SUM INVESTMENT DETAILS

Lump sum contribution (minimum R2,000.00) (May not exceed R36 000 per year)

Date of deposit/transfer

Please indicate the method of payment below:

Unit transfer from another Tax Free Savings account (please complete the separate Tax Free Savings Transfer Request Form).

Electronic/internet transfers – Electronic transfers may take a few days to appear in the product's bank account.

Electronic collection by the Administrator – Electronic collection is restricted to a maximum of R1,000,000 per debit. An amount greater than this will require the Administrator to make multiple debits, which may result in additional transaction costs. The investment will be processed **one (1) business** day after the last debit is received. The reference on your bank account will be a combination of the abbreviated product name (PPS TFIA1) and a 12-digit client number e.g. PPS TFIA1 123456789012.

Please do the electronic collection on

or as soon as possible thereafter.

Source of funds for this investment (compulsory)

Salary Savings Business Gift/Inheritance Other

Phasing-in details

Lump sum investments can be made directly into the Investment Option(s) of your choice or can be phased in over a period of time. If this option is selected, all monies will be invested in the PPS Enhanced Yield Fund and will be phased into your selected Investment Option(s). Your investment will not be phased in unless specified below.

Please phase-in my investment over 3 months 6 months 12 months

Phase-ins will be generated on the 9th of the month, and priced on the 10th. Should either of these days fall on a weekend or public holiday, the process will take place on the following business day.

G DEBIT ORDER INVESTMENT DETAILS

Debit order investment amount (minimum R500) Commencement month

 Collection date
 1st
 7th
 15th
 28th

 Frequency
 Monthly
 Quarterly
 Half-yearly
 Yearly

If not specified, debit order collection will be monthly on the first.

If cut-off for your specific collection date is missed, the debit order will commence on the same day of the following month.

The reference on your bank account will be a combination of the abbreviated product name (PPS TFIA1) and a 16- digit investment number e.g. PPS TFIA1 POL1234567890123.

H BANK ACCOUNT DETA	ILS FOR DEBIT ORDER	RS				
The following bank details will be use Should you wish to update your bank				ment Form.		
Account holder name						
Bank		Account	number			
Branch		Bran	ch code			
Type of account		Account holder ID	,			
Current Savings	Transmission		umber/Trust number/ ompany registration number			
Source of funds for this investment	(compulsory)					
Salary Savings Bus	siness Gift/Inheritance	Other				
Please note additional documents r	nay be required					
 If the bank account holder is a th If bank account holder is a third with copies of their ID document 	party legal entity, we require	e a letter from the bank				
I, the undersigned, request and autho	rise PPS Investments to debi	it the bank account spe	cified above.			
Signature of bank account holder/ Authorised person for third party legal entity			Date			
I INVESTMENT OPTION((S)					
For a comprehensive list of available I from the PPS Investments Client Servi		refer to the Investment	t Option Schedule available on v	www.ppsinvestments.co.za or		
Please ensure that the percentages	completed in the debit ord	der investment and lu	mp sum investment column to	tal 100%.		
Investment Option (complete full I	nvestment Option name a	nd class)	Lump sum investment %	Debit order investment %		
		TOTAL	100%	100%		
J FINANCIAL ADVICE FE	FS					
I acknowledge that I have received fir financial adviser and I agree to the pa	nancial advice from the finan		ils are completed in Section L b	elow. This is my appointed		
Initial lump sum fee	Initial debit orde	er fee	Ongoing fees p	er annum		
Max. 3% (excl. V		Max. 3% (excl	3 3 .	Max. 1% (excl. VAT)		
Fees will be paid proportionately from						
Specific Investment Option		· ,				
The Administrator will pay ongoing ac therefore accrue to the Administrator Investments' fee structure.	lvice fees to your financial ac as an additional fee over and	dviser on your behalf a d above the administra	nd will recover these fees from y tion fee applicable to your inves	our investment. These fees will tment in terms of PPS		

CLIENT DECLARATION

I, , hereby confirm that:

- All information provided in this form and all other documents signed by me, whether in my handwriting or not, is correct I am responsible for the accuracy and completeness of all answers, statements or other information provided by me or on my behalf I will inform PPS Investments if any of the information supplied changes I have not received advice from PPS Investments or the Administrator

- I have not received advice from PPS investments of the Administrator I certify that the information provided in terms of Foreign Accounts Tax Under penalties of perjury, I declare that I have examined the information completed on this form and to the best of my knowledge believe it is true, correct, and complete. Compliance Act ("FATCA"), the Organisation for Economic Co-operation and Developments ("OECD") and Common Reporting Standard ("CRS") is correct and that unless stated otherwise, I am not a tax resident of the United States of America.

and I have read, understood and agreed to:

 The Product Terms, Conditions and Declarations which may change from time to time The Minimum Disclosure Documents (MDDs) of the chosen fund(s) including, but not limited to, the Total Expense Ratio (TER) and Transaction Cost(TC) applicable to my investment. 				
 In the case of Customised Solutions, the Minimum Disclosure Document of the underlying funds can be obtained from the respective Managers. The Effective Annual Cost disclosure available from my financial adviser, the PPS Investments website or from the Client Service Centre. 				
Opportunity to share in profits				
paid a portion of our profits from your in	ovider product, the Accidental Death product opens your door to a PPS Profit-Share Account into which you'll be vestments with us. With the Accidental Death product, a tax-free cash lump sum of up to R2 000 000 could be to fyour accidental death. Ask your financial adviser for more information on this product or request information			
I do not have a financial adviser and	would like to receive an application form and explanatory brochure directly.			
Signature of investor				
	Date			
L FINANCIAL ADVISER DET	AIL AND DECLARATION			
Financial adviser name				
Financial adviser institution				
Financial adviser code	FSP number			
To ensure fair outcomes for investors, we (the financial adviser). As such, we reques	(as the product supplier) are required to ensure appropriate sharing of responsibility between ourselves and you t that you provide the following assurance to us:			
I confirm that I have concluded the a their circumstances) with respect to	analysis necessary to provide appropriate advice (which is both suitable for the investor and takes into account the product suppliers products considered and selected.			
• I declare that I am a licensed Financial Services Provider and have made the disclosures required in terms of the Collective Investment Schemes Control Act, No. 45 of 2002; the Financial Advisory and Intermediary Services Act, No. 37 of 2002; and all subordinate legislation to the investor.				
I confirm that I have met directly wit bears a likeness to the photograph of	h the client or the person acting on behalf of the client recorded in this application, and confirm that he/she on his/her identity document; and			
I have verified his/her identity with continuous c	original acceptable documentation, copies of which are attached.			
I warrant that I have explained all fee understand and accept that the inve	es to the investor, including but not limited to the Effective Annual Cost (EAC), that relate to this investment and I stor may withdraw his / her authority for payment of advice fees in writing to PPS Investments.			
Signature of financial adviser				
	Date			

Date
Contact us

PPS Investments (Pty) Ltd, PPS Multi-Managers (Pty) Ltd, PPS Investment Administrators (Pty) Ltd and PPS Insurance Company Ltd are licensed financial services providers.

PPS Management Company (RF) (Pty) Ltd is a licensed collective investment scheme manager.