Prudential Unit Trust Application Form
FORM A

Authorised as a Discretionary Financial Services Provider in terms of the Financial Advisory and Intermediary Services Act, 2002

PRUDENTIAL
PORTFOLIO MANAGERS

Additional Compulsory Information for Natural Persons

Please tick the correct category of natural person for which additional information is submitted.

- ☐ Guardian of a minor
- ☐ Spouse (married in community of property)
- ☐ Additional member (CC)
- ☐ Additional signatory (Company or CC)
- ☐ Foreign signatory (Company or CC)
- ☐ Majority shareholder (Company)
- ☐ Managing member (CC)
- ☐ Authorised person (Trust)
- ☐ Beneficiary (Trust)
- ☐ Founder (Trust)

Title ☐☐☐☐ Male ☐ Female ☐

Surname ______________________

First name ______________________

ID or passport number ☐☐☐☐☐☐☐☐☐☐☐☐☐ Date of birth D D M M Y Y Y Y

Resident ☐ Non resident ☐ Nationality ______________________

Residential Address ______________________

______________________ Code ☐☐☐☐

Postal Address ______________________

______________________ Code ☐☐☐☐

Home ( ) ______________________ Fax ( ) ______________________

Work ( ) ______________________ Cell ______________________

E-mail ______________________

FICA Compliance

In terms of the Financial Intelligence Centre Act, 2001 ("FICA") we require a copy of the following documentation:
1. Identity document or passport
2. Copy of utility bill or similar to verify your residential address
3. Copy of correspondence from SARS to verify your tax number

Authorisation and Declaration

I/We warrant that the information contained herein is true and correct, and that, where this application is signed in a representative capacity, I/we have the necessary authority to do so and that this transaction is within my/our power. I/We understand that this application, read with the Deed, constitutes the entire agreement between Prudential Portfolio Managers Unit Trusts Ltd and myself/ourselves. I/We confirm that information pertaining to my/our account (including duplicate statements, valuations and other information that may be required from time to time) may be released to myself or the Financial Advisor identified in the application form in electronic or written format. I/We understand these Terms and Conditions. I/We herewith confirm that I/we have received the disclosure information as required by Section 3 of the Collective Investment Schemes Control Act, Act 45 of 2002, from Prudential Portfolio Managers Unit Trusts Ltd or the Financial Adviser prior to completing this application form.

I/we confirm that I/we have received the following information from either Prudential or my Financial Advisor:

- investment objectives
- the calculation of the NAV and dealing prices
- charges
- risk factors
- distribution of income accruals
- any additional information necessary to enable the investor to make an informed decision

______________________ D D M M Y Y Y Y

Signature Date

Please fax this form to 021 671 3343 or posted to PO Box 23167, Claremont, 7735.
Our client service number is 0860 105 775 or visit our website at www.prudential.co.za