

Initial Investment

Living Annuity

Funded by retiring from a retirement fund

Individuals



The Nedgroup Investments Living Annuity is underwritten by Nedgroup Structured Life Limited

| | | | |
|---------------------------|-------------|--------------------------------------|--------------|
| FSCA Registration number: | 10/10/1/002 | SARS tax directive reference number: | 10/10/1/0002 |
|---------------------------|-------------|--------------------------------------|--------------|

This form will only be accepted when submitted with:

- Clients onboarding for first time: Client Details - ‘New to Nedgroup Investments Individual’ form
- Clients wishing to invest into a new product: Client details - ‘Existing Individual Investor’ form

1. Investor details

Investor name

SA ID number / Passport number

2. Investment details

Intended purpose of investment

☐ Invest for over 5 years

Nature of relationship with Nedgroup Investments

☐ Invest a single amount with frequent withdrawals

Investment amount

Estimated amount **R**

Transferring from: ☐ Retirement Annuity Fund ☐ Pension Fund ☐ Provident Fund
☐ Pension Preservation Fund ☐ Provident Preservation Fund
☐ An existing Nedgroup Investments Living Annuity as the beneficiary of a death claim

Full name of transferring institution (Administrator)

Phase-ins

Do you require your investment to be phased in ☐ Yes ☐ No

If ‘Yes’, please submit the relevant ‘Phase-in’ form available from our Client Services Centre.

If you elect to phase-in your investment, the investment amount will be invested into Nedgroup Investments Core Income Fund and phased in monthly over the selected period into the designated unit trust portfolio(s).

3. Unit trust portfolio selection

Please note:

- Income distributions will be reinvested (after tax if applicable)

Financial planning fees (if applicable)

- If no fees have been specified, 0% will apply
- If a fee is higher than the maximum is specified, the maximum will apply

| | | Only applicable if investing with a Financial Planner | |
|-------------------------|-----------------------|---|-----------------------|
| Unit trust portfolio | Percentage allocation | Initial fee (excl VAT) | Annual fee (excl VAT) |
| | | Lump sum | |
| | % | % | % |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total (must equal 100%) | | % | |

Fee account selection (if required)

Please note:

- If the funds are depleted in the specified unit trust portfolio, the fees will be recovered from the original unit trust portfolio

Indicate the unit trust portfolio from which the fee is to be recovered.

4. Income payment details

Please note:

- Regardless of whether you choose a rand amount or a percentage, your income must fall within the regulatory limits of 2.5% and 17.5% per year (both subject to change by the regulatory authority and / or legislation)
- The income from your Living Annuity account group may only be amended annually during your anniversary month subject to the applicable cut-off dates
- Refer to the Living Annuity Payment Schedule on our website for more information on income revision cut-off dates and income payment dates. **Payments are made on or around the 20th business day of each month.** Please note that payments to Nedbank accounts will reflect the day after the payment date. Due to bank processing timelines, payment to other banks may take up to two business days to reflect
- If not indicated below, tax will be deducted in accordance with income tax legislation
- If a tax rate lower than the rate applicable in terms of the tax tables is required, a tax directive must be submitted with this form. This directive will be valid only for the period stipulated thereon. You may renew this by applying to SARS. If a new updated tax directive is not received prior to the expiry of the outdated one, normal tax table rates will apply

Please indicate a required tax rate if different from the standard tax table %

Income details

| Frequency choice | | Income requirement | |
|------------------|-----------------------|--|-------------|
| Select one | | Percentage OR Rand amount (before tax) | |
| ✓ | | % | Rand amount |
| <div></div> | Monthly in arrears | | |
| <div></div> | Quarterly in advance | | |
| <div></div> | Biannually in advance | | |
| <div></div> | Annually in advance | | |

Should withdrawals to fund your income be made proportionally from all unit trust portfolios? Yes No

If 'No', please specify the unit trust portfolio(s) from which withdrawals are to be made.

Please note:

- Should the value of the unit trust portfolio(s) selected become depleted, withdrawals will be processed proportionately from the remaining unit trust portfolios

| Unit trust portfolio | Percentage allocation |
|-------------------------|-----------------------|
| | % |
| | % |
| | % |
| | % |
| | % |
| Total (must equal 100%) | % |

5. Investor bank account details

It is mandatory to complete this section.

Please note:

- No third-party payments will be processed
- Payments will be delayed if the name of the account holder as registered with the bank is different from that completed below

Name of account holder (as registered with bank)

Name of bank

Account number

Name of branch

Code

Account type

Current

Savings

Country

6. Beneficiary nominations (Individuals only)

Please note:

- Beneficiary nominations will only be accepted on written instruction from the investor. Persons acting on behalf of the investor may not nominate beneficiaries. Beneficiary nominations made by Persons acting on behalf of the investor will be rendered null and void
- Please indicate below in what proportion your beneficiaries are to share in these proceeds
- Beneficiary percentage allocation must equal 100%, no decimals allowed

First beneficiary

Percentage allocation (no decimals) % Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

SA ID number

Passport number (if foreign national)

Passport expiry date Passport country

Nationality

Cell phone number (mandatory) + (0)

Alternative contact number + (0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory) + (0)

Email address

Second beneficiary

Percentage allocation
(no decimals)

%

Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

D

D

M

M

Y

Y

Y

Y

SA ID number

Passport number
(if foreign national)

Passport expiry date

D

D

M

M

Y

Y

Y

Y

Passport country

Nationality

Cell phone number (mandatory)

+

(0)

Alternative contact number

+

(0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory)

+

(0)

Email address

Third beneficiary

Percentage allocation
(no decimals)

%

Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

D

D

M

M

Y

Y

Y

Y

SA ID number

Passport number
(if foreign national)

Passport expiry date

D

D

M

M

Y

Y

Y

Y

Passport country

Nationality

Cell phone number (mandatory)

+

(0)

Alternative contact number

+

(0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory)

+

(0)

Email address

Fourth beneficiary

Percentage allocation
(no decimals)

%

Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

D

D

M

M

Y

Y

Y

Y

SA ID number

Passport number
(if foreign national)

Passport expiry date

D

D

M

M

Y

Y

Y

Y

Passport country

Nationality

Cell phone number (mandatory)

+

(0)

Alternative contact number

+

(0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory)

+

(0)

Email address

If you would like to nominate additional beneficiaries, please attach a separate list signed by the investor detailing the information required above.