

Intermediary application form

Contact details

Tel:	0800 864 418	Postal address	Physical address
Fax:	088 021 671 3112	PO Box 1016	Fifth Floor, MontClare Place
Email:	clientservice@camissa-am.com	Cape Town	Cnr Campground and Main Roads
Website:	www.camissa-am.com	8000	Claremont, 7708

Completing this form

Complete all sections of this form indicating your selections with a tick mark (where applicable).

Should you require any assistance in completing this form, please contact our client service team on 0800 864 418 or email us at clientservice@camissa-am.com.

Please note that the onus is on the intermediary to inform us of any changes to personal details (including, but not limited to, bank account, address and contact details).

Instructions will only be processed once all requirements (as specified in this form) have been met. Fax the completed form and all supporting documents to +27 88 021 671 3112, or email clientservice@camissa-am.com.

Checklist

Refer to the **Supporting Guidelines for FICA documents** for detailed information. In simple terms you will need:

- Signed and dated Intermediary application form
- Documentation as per section C.

*These documents must be less than three months old

Important information

The Camissa unit trust fund range is offered by Camissa Collective Investments (RF) Limited (Camissa) [Reg. No. 2010/009289/06], a registered management company in terms of the Collective Investment Schemes Control Act, No 45 of 2002. Camissa is a subsidiary of Camissa Asset Management (Pty) Ltd [a licensed FSP], the investment manager of the unit trust funds and a voting member of the Association for Savings and Investment SA (ASISA). Camissa has the right to refuse an application if it considers an investor to be a high risk and/or especially sanctioned client. Investments in the selected Collective Investment Schemes in Securities (unit trusts) are made and administered subject to the provisions of the Collective Investment Schemes Control Act No. 45 of 2002, in accordance with the deeds of such funds and subject to each scheme's fee structure as amended from time to time. Based on Exchange Control Regulations, certain unit trust portfolios are subject to availability. All the funds listed in our fund range may be capped at any time for them to be managed according to their respective mandates. Unit trusts are generally medium to long-term investments. The value of units will fluctuate in line with market and exchange rate movements. Past performance should not be used as a guide for future performance. Unit trusts are traded at ruling prices, which are calculated on a Net Asset Value (NAV) basis. NAV refers to the value of the fund's assets less the value of its liabilities. The Camissa funds, except for the Camissa Islamic funds, may engage in scrip lending and borrowing (up to 10% of the value of the fund). Camissa will engage in borrowing if a fund has insufficient cash or if its assets cannot be released to repurchase or cancel units. All funds are valued and priced at 15:00 each business day and at 17:00 on the last business day of the month.

Intermediary application form

I/we hereby apply to be appointed as an intermediary to promote and market selected Camissa products. Unless the context indicates otherwise, expressions used herein, which are defined in the Terms and Conditions in Annexure A, shall have the same meaning as that set out in the Terms and Conditions.

A. Intermediary's details

Registered name of business

Trading name

Registration number

VAT number

FSP license number

Income tax number

Contact details

Telephone number

Fax number

Mobile number

Email address

Website address

Postal address

Code

Physical address

Code

Business status

Sole proprietor/Natural person Pty Ltd Partnership Close Corporation

Public Company Other (Please specify)

Number of years established

Business references (please list three)

Contact name	Company name	Contact number

Initial _____

B. List of representatives and key individuals

Surname

First name(s) Title

ID/passport number (if foreign national) (please send certified copy)

Surname

First name(s) Title

ID/passport number (if foreign national) (please send certified copy)

Surname

First name(s) Title

ID/passport number (if foreign national) (please send certified copy)

Surname

First name(s) Title

ID/passport number (if foreign national) (please send certified copy)

Please supply additional advisers' information on an additional page.

C. Checklist of information and supporting documentation required

Copies of the supporting documentation will only be accepted if all text and photographs are clearly legible.

Part one

a) Information to be specified in respect of **every** manager, close corporation member, partner and person authorised to transact on the entity's behalf:

- Full names
- ID/passport number (if foreign national)
- Date of birth
- Residential address
- Contact details (including email address)

b) Supporting documentation required in respect of **every** manager, close corporation member, partner and person authorised to transact on the entity's behalf:

- Copy of ID/passport (if foreign national)

Initial _____

- c) Supporting documentation required in respect of companies, close corporations, partnerships and other legal entities:

Proof of SA income tax number (eg any document issued by SARS bearing name and tax number)

Proof of VAT number (eg any document issued by SARS bearing name and VAT number)

Proof of registered address (eg registration documents)

Proof of business address (eg bank statement, utility bill or telephone account)

Proof of trading name (eg copy of a letterhead)

Proof of banking details (eg bank statement or cancelled cheque less than three months old)

- d) Additional supporting documentation required in respect of a **company**:

Copy of Certificate of Incorporation (CM1) bearing Registrar's stamp and company secretary's signature or similar official documentation for foreign companies

Copy of Notice of Registered Office and Postal Address (CM22)

- e) Additional supporting documentation required in respect of a **close corporation**:

Founding Statement and Certificate of Incorporation (CK1) bearing Registrar's stamp and Company Secretary's signature or similar official documentation for foreign companies

Amended Founding Statement (CK2)

- f) Additional supporting documentation required in respect of **other legal entities**:

Constitution or founding document

Part two (if applicable)

- a) Information to be specified in respect of every holder of 25% or more of the voting rights within the entity:
If such a holder is a **natural person**:

Full names

ID/passport number (if foreign national)

Date of birth

Residential address

Contact details

If such a holder is a **company/foreign company/close corporation/partnership/trust**:

Registered name

Trading name

Initial _____

Legal form

Contact name

Registration number (if applicable)

Registered address

Business address

Contact details

b) Supporting documentation required in respect of every holder of 25% or more of the voting rights within the entity:

If a **natural person**:

ID/passport number (if foreign national)

If a **company (SA or foreign)/close corporation/partnership/trust/other legal entity**:

Proof of business address (eg bank statement, utility bill or telephone account)

Proof of registered address (eg registration document)

Proof of trading name (eg copy of a letterhead)

If a **company**:

Copy of Certificate of Incorporation (CM1) and of Notice of Registered Office and Postal Address (CM22)

If a **foreign company**:

Copy of official document issued by an authority for recording the incorporation of companies

If a **close corporation**:

Copy of Founding Statement, Certificate of Incorporation (CK1) and Amended Founding Statement

If a **partnership**:

Copy of partnership agreement

If **another legal entity**:

Copy of constitution or founding document

If a **Trust**:

Copy of trust deed and authority give by the Master of the High Court

Initial _____

D. Payment of fees

Instructions for reinvestment of fees payable by Camissa for the selected products as referred to in item A of Annexure A of the attached Terms and Conditions. **Refer to Annexure A of this form for a summary of our fund range.**

<input type="checkbox"/> Camissa Equity Alpha Fund	<input type="checkbox"/> Camissa SA Equity Fund	<input type="checkbox"/> Camissa Islamic Equity Fund
<input type="checkbox"/> Camissa Top 40 Tracker Fund	<input type="checkbox"/> Camissa Global Equity Feeder Fund	
<input type="checkbox"/> Camissa Islamic Global Equity Feeder Fund	<input type="checkbox"/> Camissa Balanced Fund	
<input type="checkbox"/> Camissa SA Balanced Fund	<input type="checkbox"/> Camissa Islamic Balanced Fund	
<input type="checkbox"/> Camissa Stable Fund	<input type="checkbox"/> Camissa Protector Fund	<input type="checkbox"/> Camissa Islamic High Yield Fund

E. Bank account details

Bank	<input type="text"/>	Account number	<input type="text"/>
Branch	<input type="text"/>	Branch code	<input type="text"/>
Type of account	Current <input type="checkbox"/>	Transmission	<input type="checkbox"/> Savings <input type="checkbox"/>
Name of account holder	<input type="text"/>		
Account holder's signature	<input type="text"/>		
Date	<input type="text"/>		

If you are an authorised person, please attach proof of authorisation.

Authorised person's name	<input type="text"/>
Capacity	<input type="text"/>

Please note: A cancelled cheque or recent bank statement (not older than three months) must accompany this application. Any changes to the banking details must be sent to Camissa in writing, together with proof. Payments will not be made to third-party accounts, including credit cards and money market accounts.

F. Communication received from us

Please specify how you wish to receive the following:

Your commission statements	Email <input type="checkbox"/>	Post <input type="checkbox"/>
Our quarterly publication, UP	Email <input type="checkbox"/>	Post <input type="checkbox"/>

Initial _____

G. Foreign Account Tax Compliance

South Africa has entered into an intergovernmental agreement with the United States of America (USA). This requires South African financial institutions to comply with the Foreign Account Tax Compliance Act (FATCA). As a result, we are required by law to obtain the following additional information:

- | | | |
|--|------------------------------|-----------------------------|
| 1. Was the investor established in the USA? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Is the investor operating in the USA? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Is the controlling entity of the investor a USA entity? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Does the investor have a US Taxpayer Identification Number (TIN)? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

TIN no

5. Tax regulations require us to collect certain information about each investor's tax residency and tax classifications. We may be obliged to provide information about your account(s) to the relevant tax authorities depending on your tax residency and classification.

If you have any questions about the tax classification, please contact your tax advisor. Brief guidance has been provided in the Investment Guide.

Legal entity's classification

A legal entity must be classified as a financial institution or as a non-financial institution. Please complete either section 5.1 or 5.2 to confirm the legal entity's classification.

- 5.1 If the legal entity is a financial institution, please choose a classification from the list below that describes the entity:

- South African Financial Institution/Partner Jurisdiction Financial Institution
- Participating Foreign Financial Institution
- Non-Participating Foreign Financial Institution
- Entity Resident in the United States of America, or in a United States Territory
- Deemed Compliant Foreign Financial Institution (apart from those listed above)
- Exempt Beneficial Owner

If the legal entity has registered as a financial institution with the US Internal Revenue Service (IRS) and received a Global Intermediary Identification Number (GIN), please provide the GIN below

- 5.2 If the legal entity is a non-financial institution, please tick the appropriate box below:

- An "Active Non-Financial Institution"
- A "Passive Non-Financial Institution"

Initial _____

H. Declaration

I, the undersigned, hereby declare and confirm that:

Regulatory framework

- I declare that I am a licensed Financial Services Provider and that I am acting within the scope of my FSCA licence conditions. I 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 subordinate legislation thereto, to the investor.

Appointment as Intermediary

- I accept that Camissa may verify my identity via a credit bureau.
- I accept that Camissa reserves the right not to appoint me as Intermediary for whatever reason.
- I acknowledge and accept that the Agreement will only be concluded when an authorised representative of Camissa has signed this form and I have received written confirmation that the Agreement has been concluded.
- I hereby consent (where applicable to me as a registered VAT vendor) to Camissa using self-invoicing and confirm that I will not issue tax invoices, debit notes or credit notes in respect of the fees payable to me by Camissa.
- I further acknowledge that this form, together with the Intermediary Terms and Conditions, form the basis upon which Camissa appoints me and I agree to be bound by these Terms and Conditions.

Accuracy of information

- I warrant the above information to be correct. Camissa shall not be liable for any loss or damage suffered due to incorrect information provided by me, or a result of a change in my information, or my misrepresentation or my involvement in any fraudulent act.
- I undertake to advise Camissa in writing should any of the details completed herein change subsequent to me signing this form.

Fees

- I warrant that any fee arrangement with the investor has been made in a transparent manner and has been disclosed to the investor.
- I warrant that any and all fee arrangements are made in the best interests of the investor and are in adherence with the principles of treating customers fairly.

Tax responsibility

- I acknowledge that I am responsible to disclose any fee income to SARS and that Camissa takes no responsibility to do so.

Protection of Personal Information (POPI)

- For the purposes of the Protection of Personal Information Act No. 4 of 2013 (POPI), I consent and acknowledge that all personal data provided by me to Camissa or their independent third parties (such as fund administrators) and its respective employees may be used to enable each of the aforesaid entities to carry out their respective duties and obligations in relation to this investment or as may be permitted under POPI.
- Information will be shared if required by SARS or any other tax authority with which South Africa has signed an Intergovernmental Agreement, or to any other regulatory authority.

Signature

Name

Capacity

Place

Date

Initial _____

I. Acceptance by Camissa - for office use only

Date

Place

Signed

Approved

Name

Name

Capacity

Capacity

Initial _____