

Sanlam Plus Preservation Fund

Application for membership

SECTION A: GENERAL INFORMATION

1. Please complete this form if you wish to become a member of the Sanlam Plus Pension Preservation Fund or Sanlam Plus Provident Preservation Fund (Indicate your selection below).
2. The Administrator of the Fund is Sanlam Employee Benefits.
3. Completed documentation should be returned to Sanlam Employee Benefits via email to: sanlampreservation@sanlam.co.za
4. Please complete all the relevant sections of this application.
5. Sanlam Employee Benefits will only process this application once all required documents and information has been received and once the money reflects in the relevant Sanlam Preservation Fund bank account.
6. **Secure On-line access:**
 - 6.1 Sanlam Employee Benefits' web facility, Retirement Fund Web, allows members online access to information regarding their retirement fund benefits.
 - 6.2 By signing this form, you are consenting to comply with all Sanlam's terms and conditions pertaining to internet access and you will be issued with a unique pin-code that ensures confidentiality and security of all your information, 10 days after investment.
7. Your financial adviser will be given automatic access to view your details on the Retirement Fund Web.

Please select a fund by ticking one of the two options below:

Fund	FSB Registration number:	SARS number:
Sanlam Plus Pension Preservation Fund	12/8/30343	18/20/4/35399
Sanlam Plus Provident Preservation Fund	12/8/30342	18/20/4/35399

Document checklist	Included	
1 Completed application form (pages 1 - 8 of this form)	Yes	No
2 Original Certified Copy of your South-African bar-coded ID or valid passport	Yes	No
3 Proof of deposit	Yes	No
4 Recognition of Transfer, signed by the transferring fund	Yes	No

SECTION B: MEMBER DETAILS**Personal Details**

Title and initials:

Full names and surname:

Date of birth:

Home language:

ID Number:

Gender:

Income Tax Number:

Marital Status:

Postal Address:

Home Address:

Cell Number:

E-mail Address: *

*** NB! Compulsory field****Please fill in your email address. This is our preferred means of communicating directly with you regarding fund matters.****SECTION C: TRANSFER DETAILS** (Note: The minimum lump sum contribution is R25 000 per transaction.)**Type of transfer** (select one option below):

A transfer from a Preservation Pension Fund / Preservation Provident fund

Yes

No

A transfer from an employer Pension Fund / Provident Fund

Yes

No

A transfer due to pension interest in a divorce order

Yes

No

Transfer amount (estimated)

R

Transferring Fund details

Registered name of fund

Registration number

Contact telephone number (previous administrator)

Fund reference number (if applicable)

SECTION D: INVESTMENT SELECTION

I hereby select the following portfolios and ask that my transfer values be invested as follows:
(a maximum of 4 portfolios can be selected).

Single Manager Range	SIM Balanced Fund	%
	SIM Moderate Absolute Fund	%
	SIM Cash Fund	%
Multi-manager Range	SMM 70	%
	SMM 50	%
	SMM Moderate Absolute Fund	%
	SMM NUR Balanced Fund	%
	Sanlam Accumulation Portfolio	%
External Single Manager Range	Sanlam Foord Balanced Fund	%
	Sanlam Allan Gray Global Balanced Portfolio	%
	Sanlam Coronation Houseview Portfolio	%
	Sanlam Investec Balanced Fund	%
Smoothed Bonus Range	Sanlam Monthly Bonus Fund	%
	Sanlam Stable Bonus Portfolio	%
Index-tracking Range	Satrix Enhanced Balanced Tracker Fund	%
		Total 100%

SECTION E: NOMINATION OF BENEFICIARIES

I hereby revoke all my previous nominations and request the Fund, in the event of my death, to pay the amount which may become payable by the Fund as a result of my death, or such portion thereof as is specified below, to the person(s) mentioned below, subject to the provisions of section 37C of the Pension Funds Act.

Name and Surname	ID number	Relationship	Cell number	% of benefit
Total % allocation (must add up to 100%):				100%

Motivation (Optional): *In most cases the Trustees will not have any knowledge of your personal circumstances. The Trustees, therefore, have to rely on the information provided in this form. The Trustees suggest that you add additional information or documents to this form, providing reasons why you wish to allocate the benefits in the manner you have decided, or to provide any additional information that you believe will assist the Trustees. These notes will place the Trustees in a more informed position to make a final decision on the distribution of your benefits, and assist them in allocating your benefits in accordance with the Pension Funds Act, whilst taking your wishes into account.*

SECTION F: DETAILS OF DEPENDANTS

The following persons are financially dependent on me at present: *Persons who are financially dependent typically include: minor children, major children who are still studying or are unemployed and who are fully or partially supported by you, your spouse, an ex-spouse or child born from that relationship in respect of whom a maintenance order has been granted by the court. Any other person whose livelihood depends on regular payments/grants by yourself).*

Name and Surname	ID number	Relationship	Cell number	Nature of financial support *

** e.g. Fully supported (minor children), shared household (spouse who earns an income, Rand amount p.a. where appropriate).*

Special relationships or other information that I would like the Trustees to know about:

Important Information

What is the difference between a **beneficiary** and a **dependant** and why we need you to complete both Section E as well as Section F?

→ **Beneficiary**

You may nominate, in writing, any natural person(s) to receive your death benefits. Such a **beneficiary** can include a dependant or any other person (even if they do not necessarily depend on you financially).

→ **Dependant**

The Pension Funds Act defines a **dependant** as:

- (a) a person in respect of whom the member is legally liable for maintenance;
- (b) a person in respect of whom the member is not legally liable for maintenance, if such person -
 - (i) was, in the opinion of the board, upon the death of the member in fact dependent on the member for maintenance;
 - (ii) is the spouse of the member;
 - (iii) is a child of the member, including a posthumous child, an adopted child and a child born out of wedlock.
- (c) a person in respect of whom the member would have become legally liable for maintenance, had the member not died.

SECTION G: FEES AND EXPENSES

Administration Fees are levied by Sanlam to cover the cost of administering the Fund.

The Fund charges the following operational expenses per member:

Administration fee:	<ul style="list-style-type: none">- 0.15% (excluding VAT) per annum on the portion of assets under management between R0 and R1.5m.- 0.10% (excluding VAT) per annum on the portion of assets under management between R1.5m and R3m.- Nil for the portion above R3m.
Financial Adviser Fee:	Applicable: Yes No Annual fees are subjected to a maximum of 0.50% (excluding VAT) of the investment portfolio, charged and paid monthly in arrears. Agreed fee: % of assets (excluding VAT)
Investment Management Fees:	Investment management fees are calculated and charged on a monthly basis. A list of the latest investment management fees can be obtained: <ul style="list-style-type: none">- directly from the administrator, or- on the monthly investment fact sheet, or- in the Sanlam Plus Preservation Fund Product Guide.

SECTION G: FEES AND EXPENSES *(continued)***Contingency Reserve Account:**

The Contingency Reserve Account levies are charged on a monthly basis for expenses related to the following is used to pay expenses related to the following:

- FSCA levies and fees
- Fidelity insurance premiums
- Actuarial services
- Audit services
- Independent Trustee expenses
- Member communication expenses
- Other ad hoc fees and disbursements

SECTION H: MEMBER DECLARATION

Choose either option A or B.

Please note: should you choose option a, kindly complete Section I as well.

Option A: I have appointed a financial adviser and declare the following:

- The information given herein is true and correct,
- I take full responsibility for my choices and those recommended by my financial adviser and hereby indemnify and undertake not to hold the Sanlam Plus Preservation Fund, the Board of Trustees or Sanlam Employee Benefits and its agents, directors, officers and any entity in the Sanlam Group of Companies responsible for any losses or any eventuality that may result from the investment portfolios I select.
- I understand that the onus is on me to inform the Administrator of any change in my contact details and that any reasonable costs incurred to trace me in future will be deducted from my benefits.
- I understand that Sanlam requires access to my personal information in order to administer my preservation fund.

Signature of member: _____ Date: _____

Option B: I have not taken financial advice and declare the following:

- The information given herein is true and correct,
- I have a good understanding of investments and do not need the services of a financial adviser,
- I understand the risks in selecting my own investment portfolios and am satisfied that my selection serves my needs, and
- I take full responsibility for my choices and hereby indemnify and undertake not to hold the Sanlam Plus Preservation Fund, the Board of Trustees or Sanlam Employee Benefits and its agents, directors, officers and any entity in the Sanlam Group of Companies responsible for any losses or any eventuality that may result from the investment portfolios I select.
- I understand that the onus is on me to inform the Administrator of any change in my contact details and that any reasonable costs incurred to trace me in future will be deducted from my benefits.
- I understand that Sanlam requires access to my personal information in order to administer my preservation fund.

Signature of member: _____ Date: _____

SECTION I: FINANCIAL ADVISER DETAILS			
First name & Surname:			
ID Number of CFA:			
E-mail address:			
Brokerage name:			
Postal address:	Postal Code:		
Office number:		Fax number:	
Sanlam Commission Code <i>(if applicable)</i>		Cell number:	
VAT Registration number:		FAIS number: <i>(compulsory)</i>	
Consultancy Fees Paid via:	1. Sanlam Code 2. Business Account		
<i>Complete banking details only if option 2 selected (verification of CFA's bank details are required by way of bank statement header or cancelled cheque)</i>			
Name of bank:			
Name of branch:		Branch code:	
Account name:			
Bank account number:			
Additional contact person at CFA Office (who will deal with admin matters and consultancy fee statements)			
E-mail address		Tel number:	

Financial Adviser declaration	
I the undersigned confirm the following:	
<ul style="list-style-type: none"> - I have made the disclosures required, in terms of the FAIS Act 37 of 2002, to the investor. - I have explained all the fees that relate to this investment to the investor. 	
Signature of Financial Adviser: _____	Date: _____