

Application Form:

Legal Entities | Retail Hedge Fund



Complete Form

- Complete this form and initial each page;
- Dividend Withholding Tax Declaration;
- FATCA/Common Reporting Standards (CRS) Tax declaration.
- Please refer to the “Terms of engagement” documentation should you require any information on the processes relating to making an investment with us. This document can be found on our website.



FICA Requirements

- Provide necessary supporting documents as per FICA requirements (Annexure A) to ensure efficient handling of your application.
- It is important that all the initial stated requirements are supplied together with the completed application form. You agree to provide all documentation and information required in terms of the Financial Intelligence Centre Act, 2017 as amended (“FIC Act”), and understands that FundRock Management Company, is prohibited from processing any business transactions on your behalf until all such documentation and information has been received as part of its customer due diligence procedures. We may also at any time require additional information to meet our statutory obligation in this regard as part of our due diligence procedure.



Submit Application Form

Submit all Documentation to: fundrockinstructions@apexgroup.com

For any queries regarding your instruction, please find the below contact details:

- Email: frclientservices@fundrock.com
- Phone: +27 (0)21 879 9937 /+27 (0) 21 879 9939
- Website: www.fundrock.com/fundrock-south-africa



Verification

- The KYC team will verify the application form, FATCA and FICA documents and may contact you for more information.
- Upon approval, you will receive an email containing the bank account details of the portfolio you wish to invest in.
- Instructions will be actioned once the investor is considered FICA compliant; the valid application forms and documents are submitted and the proof of payment is received **before cut-off time**.



Cut-Off Times

- The transaction cut-off time is 14:00pm SA time on a business day.
- All instructions received after the above-mentioned cut-off time will be processed on the following business day.

Section A: Investor Details

Entity Details									
Entity/Trust Name:									
Trading Name:									
Entity Type: (Please select applicable options)	Listed Company		Closed Corporation		Foreign Company				
	Collective Investment Scheme		Medical Scheme		Trust				
	Retirement/Pension/ Provident Fund		Partnership		Government Entity/SOE				
	Private Company		LISP/Nominee		Non-profit Organisation				
	Other: (please specify)								
Industry: (Please select applicable options)	Financial/Insurance Services		Art/Entertainment & Recreation		Agriculture, Forestry & Fishing				
	Manufacturing		Tourism		Education				
	Retail		Construction & Infrastructure		Real Estate				
	Medical/Healthcare		Communication & Technology		Transportation, Storage & Logistics				
	Government/SOE		Motor Trade		Professional Services				
	Non-Profit Organisation/NGO		Mining		Utilities				
	Other: (please specify)								
Registration Number:									
Income Tax Number/s:					VAT Registration Number:				
Country of Incorporation:					Country of Operation:				
Date of Incorporation/ Registration:		d	d	m	m	y	y	y	y

Business Contact Details									
Landline:					Cell phone:				
Email:									
Please confirm your preferred method of communication. *				Email:		Apex Connect		Post	

* If no option is specified, email will be regarded as default. Refer to Section F (page 12) for an explanation of the FundRock Access online portal

Business Address

Physical Address:			
Country:		Postal Code:	
Postal Address: (If different from business)			
Country:		Postal Code:	

Contact Details for Person at Entity

Title:			
First name(s):		Surname:	
Identification / Passport Number:		Nationality:	
Capacity:			
Landline:		Cell phone:	
Email:			

For Institutional Investors Only:

SARB Classification							
Are you registered with the SARB Financial Surveillance Department?						Yes	No
Type of Business:	CIS	Retirement Fund	LT Insurer	LISP	Investment Manager		
	Other (please specify)						
FAIS Entity Classification (Assets Under Management)							
CIS	Retirement Fund	LT Insurer	FoHF	ST Insurer	Other		

Source of Funds*

Source of funds for this transaction (The origin of the funds involved in a business relationship or single transaction, and includes both the activity that generated the funds as well as the means through which the funds were transferred):

Salary		Savings		Sale of Assets		Inheritance	
Other (please specify):							

Source of Wealth*

Source of Wealth (The activities that have generated the total net worth of the client):

Salary		Savings		Sale of Assets		Inheritance	
Other (please specify):							

*FundRock reserves the right to request proof of the source of funds and the source of wealth.

Banking Details of the Investor:

Banking Details			
Name of Account Holder:			
Bank:		Branch Code:	
Account Number:		Account Type:	
Swift		IBAN	

- Please provide FundRock with Proof of Bank Account Details.
- The onus is on the investor to inform FundRock of any changes to the bank account details.
- No payments will be made into third party bank accounts or credit cards. (i.e. payments will only be made to the bank account in the name of the registered investor).
- Bank account details specified above will be used for disinvesting, income distribution payments etc.

Signature of Account Holder: _____

d	d	m	m	y	y	y	y
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Fund Banking details:

In accordance with the requirements under the FIC Act, we do not reflect our funds' banking details on our forms. In order to meet our obligations in this regard, we will first establish and verify your identity before we will send our funds' banking details to you.

Section B: Investment Option

Method of Payment:

Electronic internet transfers may take up to two business days to appear in the bank account. Units may only be purchased upon receipt of documentation and funds into the account. Please attach proof of transfer.

Select your investment fund(s):

Note: Please select the fund(s) you would like to invest in and indicate the amount you would like to invest. Please be advised that no cash deposits will be accepted.

If you are not sure of which fund(s) suit your needs, please consult your financial advisor.

Please review the full list of funds and the Minimum Disclosure Documents (MDD's) with applicable fund minimums and fees.

You may view these on our website: www.fundrock.com/fundrock-south-africa

Class selection on your investment is deemed mandatory in order to successfully process your instruction.

Fund Name	Class	Investment Amount		Income Distribution	
		Monthly	Once-off Lump Sum	Re-invest	Pay-out
Storm Capital SA FR Retail Hedge Fund		R	R		
Storm Capital Worldwide Flexible Value FR Retail		R	R		
Storm Capital Worldwide Select FR Retail Hedge Fund		R	R		

Regular Withdrawals:

Please only complete this section if you would like to receive a regular withdrawal from your investment. Note that there might be tax consequences associated with withdrawals.

Please withdraw from my investment:

Monthly Quarterly Bi-annually Annually

Fund Name	Regular Withdrawal Amount
Storm Capital SA FR Retail Hedge Fund	R
Storm Capital Worldwide Flexible Value FR Retail	R
Storm Capital Worldwide Select FR Retail Hedge Fund	R
Total per frequency	R

First withdrawal payment date:

d	d	m	m	y	y	y	y
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Regular withdrawals are processed on the first calendar day of every month.

If the withdrawal date falls on a weekend or public holiday, the withdrawal will be processed on the next business day.

Section C: Financial Advisory

Complete this section if you receive advise from a Financial Advisor

Please note that all financial advisors would need to be contracted with Fund Rock Management Company in capacity as a financial advisor. If you are not yet contracted with Fund Rock Management Company, please download and submit the financial advisor application form in order to onboard you in capacity as a financial advisor. The applicable form can be found on our website: www.fundrock.com/fundrock-south-africa.

Advisor's Contact Details			
Name:			
Surname:			
FSP Name:			
Contact Email:		Contact Number:	
Address:			
			Code:
FSP Licence Number:		Licence Category:	
Financial Advisor Code:		VAT Number (if applicable):	

Declaration

I, the appointed Financial Advisor for this investment application declare that:

- I am licensed to render services in respect of this product.
- I have made the disclosures required in terms of the Financial Advisory and Intermediary Services Act No. 37 of 2002 ("FAIS") and subordinated legislation thereto, to the investors.
- I have read the application form and the terms and conditions of this investment and have explained them to the investor. To the extent they apply to me, I agree to be bound by the contents of this application form.
- I confirm that the Manager is the primary accountable institution, in terms of the FIC Act and is responsible for the identification and verification of the investor and myself. This application will only be processed on completion of such identification and verification.
- I have explained all fees that relate to this investment to the investor/s and understand and accept that the investor/s may withdraw his / her authority for payment at any time, in writing.
- My personal information may be used by the Manager in the normal course of business to provide the products and services and the Manager may retain any information for purposes of investment transactions, processing and administration, and to communicate directly with me. Personal information will not be given or sold to any third parties. The Manager will disclose or report personal information if and when required to do so by law or any regulatory authority, and to our employees, or agents and/or service providers with whom we have a business agreement who require such information to carry out their duties.
- I will forward all investor documents to the investor as soon as I receive them.

Signature of Financial Advisor:										
Name of Signatory:										
Place:		Date:	d	d	m	m	y	y	y	y

Financial Advisor Fees

I hereby confirm that the Financial Advisor whose details are recorded in Section C above is my appointed Financial Advisor and I agree to the payment of the following fees:

- Initial Advice Fee: _____% (applied to each contribution received exclusive of VAT).
- Ongoing Advice Fee: _____% (per annum of the market value of the portfolio, charges by means of unit reduction and paid to the Financial Advisor monthly in arrears, exclusive of VAT).
- I may instruct FundRock to cease paying the ongoing advisor fee at any time.

Signature of the Investor or Authorised Representative: _____

*Should you be investing in more than one portfolio with different fees having been agreed upon with your Advisor, please submit a signed letter detailing this, together with your application. If above fee is not completed it will default to zero.

Section D: Dividend Withholding Tax Declaration (DWT)

Declaration and Undertaking for Exemption:

South African Revenue Service (“SARS”) requires that we pay dividend tax on your behalf where applicable. The rate of dividends withholding tax applied for South African residents is as per section 64E of the Income Tax Act. FundRock Management Company (RF) (Pty) Ltd (“FundRock”) will deduct this tax before paying any dividends to you or re-investing it into your investment account.

In order to qualify for the exemption from DWT referred to in section 64F read with section 64FA(2), 64G(2) or 64H(2) of the Income Tax Act, 1962 (Act No 58 of 1962) (“the Act”), please sign this declaration and written undertaking. If you do not complete this form, dividend tax will be payable.

Please complete all the sections on the form. Please initial any amendments or changes and initial the bottom of each page.

Beneficial Owner	
Full Name and Surname or Registered Name:	
Nature of Person / Entity:	<input type="checkbox"/> Individual <input type="checkbox"/> Trust (of any type) <input type="checkbox"/> Company
	<input type="checkbox"/> Government Entity <input type="checkbox"/> Retirement Fund <input type="checkbox"/> Other
Residency:	<input type="checkbox"/> South African Resident <input type="checkbox"/> Non-Resident
Country of Residence:	
Country where Tax is applicable:	
Identity / Registration Number:	
South African Income Tax Number:	
Passport Number (if applicable):	
Country of Issue (if applicable):	

Reason for Exemption

- Par (a) – a company which is resident in South Africa
- Par (b) – the government, provincial government or municipality (of the Republic of South Africa)
- Par (c) – a public benefit organisation (approved by SARS ito section 30(3) of the Act)
- Par (d) – a trust contemplated in section 37A
- Par (e) – an institution, body, or board contemplated in section 10(1)(cA) of the Act
- Par (f) – a fund contemplated in section 10(1)(d)(i) or (ii) of the Act (pension fund, pension preservation fund, etc)
- Par (g) – a person contemplated in section 10(1)(t) of the Act (CSIR, SANRAL, etc)
- Par (h) – a shareholder in a registered micro business as defined in the Sixth Schedule to the Act to the extent that the aggregate amount of the dividends paid by that registered micro business to its shareholders during the year of assessment in which that dividend is paid does not exceed R200,000.00 (Two Hundred Thousand Rand)
- Par (i) – a small business funding entity as contemplated in section 10(1)cQ.
- Par (j) – a person that is not a resident and the dividend is a dividend contemplated in paragraph (b) of the definition of the definition of 'dividend' in section 64D (i.e. a dividend paid by a non-resident company that is listed in South Africa).
- Par (k) – a portfolio of a collective investment scheme in securities
- Par (l) – any person to the extent that the dividend constitutes income of that person
- Par (m) – any person to the extent that the dividend was subject to secondary tax on companies
- Par (n) – any fidelity or indemnity fund contemplated in section 10(i)(d)(iii)

If other, please provide details below:

Declaration and Undertakings

Declaration

Declaration in terms of section 64FA(1)(a)(i), 64G(2)(a)(aa) or 64H(2)(a)(aa) of the Act:

I, _____

the undersigned hereby declare that dividends paid to the beneficial owner is exempt, or would have been exempt had it not been a distribution of an asset in specie, from the dividends in terms of the paragraph of section 64F of the Act indicated above.

Declaration in terms of section 64FA(1)(a)(ii), 64G(2)(a)(bb) or 64H(2)(a)(bb) of the Act:

I, _____

the undersigned undertake to inform FundRock in writing should the circumstances of the beneficial owner referred to in the declaration above change.

Authorised Signature:										
Name of Signatory:										
Capacity:										
Place:		Date:	d	d	m	m	y	y	y	y

Section E: Tax Residency Self-Certification

- This Declaration must be completed by all investors.
- FundRock is obliged to collect certain information about each investor’s tax arrangements for Foreign Account Tax Compliance act (“FATCA”) and the Common Reporting Standard (“CRS”) and may share this information with the relevant tax authorities.
- If any of the information below about the Investor’s tax residence or FATCA/CRS classification changes in the future, please ensure that we are advised of these changes promptly.
- If you have any questions about how to complete this form, please contact your tax advisor.

This form is intended to request information consistent with local law requirements.

Please complete this form if you are an entity account holder, sole trader or sole proprietor.

Where you need to self-certify on behalf of an entity account holder, please also complete an “Entity Tax Residency Self-Certification (W-8BEN-E)” form, available on our website: www.fundrock.com/fundrock-south-africa

Please initial any amendments or changes and the bottom of each page.

Is the entity resident for tax purposes in any other country other than South Africa? Yes No

If yes, please list all countries in which the entity is resident for tax purposes and indicate the tax identification number (TIN) for each of those countries. If a country does not issue a TIN, please provide an equivalent number, for example, a registration number or similar official identification number.

If you cannot provide a TIN or other equivalent number, please provide one of the following reasons:

Reason A – The country does not issue TIN’s to its research.

Reason B – You are not required to be registered for tax.

Reason C – The domestic law of the country does not require the TIN to be disclosed.

Country	TIN or equivalent	If no TIN is available enter reason A, B or C

The taxation laws of a country will determine whether the entity is a tax resident of that country. If you are unsure about the entity’s tax residency, please contact your tax adviser.

FATCA Classification Status:

Please select the applicable classification below. For purposes of this section “foreign” means Non-US (any investor (including South African) who is not from the United States). Non-US entities classified as a Foreign Financial Institution (FFI) or a Non-financial Foreign Entity (NFFE).

Please tick the appropriate fields below:

	Specified U.S Person Refer to the definition of “Specified U.S Person” in the W8-BENE form that is available on our website
Foreign Financial Institution (FFI) (Please note this is not an exhaustive list, use “other” if necessary)	
	Participating FFI
	Non-Participating FFI
	Reporting FFI
	Registered deemed compliant FFI
	Sponsored FFI
	Certified deemed compliant
Other, please specify:	
Non-Financial Foreign entity (NFFE)	
	Active non-financial foreign entity (Active NFFE)
	Passive non-financial foreign entity (Passive NFFE) if you ticked “Passive NFFE”, please complete the following
	Trust (If you ticked “Trust”, please refer to the following Controlling Persons section)
	Direct reporting NFFE
	Sponsored direct reporting NFFE

GIIN Number	
Sponsor’s Name (if applicable)	
Sponsor’s GIIN Number (If applicable)	

CRS Classification Status:

Please select appropriate fields below:

Financial Institution:	
<input type="checkbox"/>	Financial Institution (Depository, custodial or specified insurance company)
<input type="checkbox"/>	Investment Entity that is NOT managed by a financial institution
<input type="checkbox"/>	Investment Entity that IS managed by a financial institution (please complete the below):
<input type="checkbox"/>	<ul style="list-style-type: none"> No – Investment Entity is a “Passive NFE”
<input type="checkbox"/>	<ul style="list-style-type: none"> Yes – Investment Entity is an “Investment Entity”
<input type="checkbox"/>	<ul style="list-style-type: none"> If you ticked “No”, please refer to the Controlling persons section
Non-Financial entity (NFE):	
<input type="checkbox"/>	Active Non-Financial entity (Active NFE)
<input type="checkbox"/>	Passive Non- Financial entity (Passive NFE) (If you ticked “Passive NFE”, refer to the Controlling persons section)
<input type="checkbox"/>	Trust (If you ticked “Trust”, please refer to the following Controlling Persons section, in respect of the founder, trustees and each beneficiary or class of beneficiaries)

Controlling Persons:

This section must be completed in respect of each controlling person, only if the entity is a passive NFFE, a passive NFE or a trust.

A controlling person is any person or entity, who exercises control over the entity (for example a shareholder, member or person with voting rights), or anyone who has management control over the business, and includes the ultimate beneficial owner, in instances where the entity is owned by another entity. In the case of a trust, the term also means the settlor (founder), the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person, exercising ultimate effective control over the trust, and in the case of a legal agreement other than a trust, the term means persons in equivalent or similar positions. The term “controlling persons” shall be interpreted in a manner consistent with the Financial Action Task Force (FATF) Recommendations.

If a controlling person is a legal entity, a separate CRS classification document is to be completed available on our website: www.fundrock.com/fundrock-south-africa or on request from us, or your financial adviser.

Declaration and Undertakings
Declaration

- I declare (as an authorized signatory) that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.
- I acknowledge that the information contained in this form and information regarding the account holder may be reported to the tax authorities of the county in which this account/s is/are maintained and exchanged with tax authorities of another country or countries in which the account holder may be tax resident where those countries (or tax authorities in those countries) have entered into agreements to exchange financial account information.
- I undertake to advise the recipient promptly and provide an updated Self-Certification form where any change in circumstances occur which causes any of the information contained in this form to be incorrect.

Authorised Signature:										
Name of Signatory:										
Capacity:										
Place:		Date:	d	d	m	m	y	y	y	y

Section F: Apex Connect Portal

The Apex Connect Portal is an online platform which gives the investor access into viewing his/her investor holdings, transaction history, static account details, investor statements as well as other pertinent investment information.

Please mark the appropriate field below:

Existing Investor New Investor

Apex Connect: Main User Details	
User Requiring Access:	
Investor Number (if existing investor):	
Email Address:	
Cell Number:	

Please indicate any additional individuals requiring access:

Name	Relationship	Email	Cell Number

Section G: Ultimate Beneficial Owner

Please complete this section for each natural person where below is applicable. If more than one natural person please complete separate Ultimate Beneficial Owner form, available on the FundRock webpage.

Please select the appropriate option below in accordance with the role of the individual for whom this section is being completed.

Owner of 5% or more shares with voting rights Exercise control of the legal entity
 Executive Director Non-Executive Director Manager Partner Other

If Other, please specify: _____

Contact Details of Natural Person			
Full Name & Surname:			
ID or Passport Number:			
Percentage of shareholding:			
Address:			
			Code:
Contact Number:		Email:	

Authorised Signature: _____

Copy of ID or Passport for each individual for whom this form is completed must be submitted with this application form as a supporting document as well as other relevant documents as per Annexure A. Please also include **a group structure/organogram** detailing the ownership structure and percentage up to the natural person that owns or exercise control of the legal entity.

“Owner of legal entity”: any natural person that owns 5% or more of the issued shares of the legal entity applicant, whether directly or indirectly, and which shares have voting rights attached to them.

“Control”: any natural person that controls the legal entity independently, or together with another person, through means other than shareholding.

Section H: Protection of Personal information

FundRock may collect, process, disclose or use your personal information for the purpose of providing the product and/or service which you have requested in the normal course of business.

FundRock is required to process and keep investor and investor representative information to perform its obligations lawfully, fairly and competently.

FundRock will disclose or report personal information if and when required to do so by law or any regulatory authority. We may also share your personal information with our employees, agents, sub-contractors, with other entities within the Apex Group, with your adviser and/or their duly appointed agent, where directed. We will only collect information that we need for that purpose.

FundRock may share information with companies within the Apex Group of companies and service providers with whom we have a business agreement to process such information on our behalf or to those who render services to us.

Apex Group is an international business and located in different geographical locations. In such instances FundRock will ensure that sufficient legislation or agreements are in place for the information to remain adequately protected. You are entitled to request access to the information we have collected, processed and shared. All processing of personal information will be done in accordance with applicable laws and FundRock privacy policy.

Section I: Terms and Conditions

- FundRock provides access to many portfolios offered by the market. Should you require any financial planning assistance, please consult your financial advisor as FundRock may not provide financial advice in respect of any investment.
- This application form together with the Main Deed and Supplemental Deed will form the legal agreement between the investor, FundRock and the asset manager. The agreement will be administered in terms of CISCA. FundRock may in its sole discretion accept or reject the investor's application form.
- The FundRock portfolios shall be priced to reflect the Net Asset Value ("NAV") prices as at the price of the day.
- Participatory interests are calculated on a NAV basis by determining the total market value of all assets in the portfolio, including any income accruals, less any permissible deductions from the portfolio. Participatory interests on investor statements are thus net of all fees.
- Participatory interests will be purchased and repurchased by the manager at the NAV calculated in accordance with the requirements of CISCA and the relevant deeds.
- Quarterly reports are available for download from the FundRock Website. FundRock will email monthly statements and contract notes on execution of transactions. Tax certificates are generated and distributed annually.
- FundRock may, at its discretion, close portfolios to new investors and existing investors to enable the portfolios to be managed in accordance with their mandates.
- FundRock reserves the right to terminate this contract by giving a calendar month's notice to the investor. Participatory interest shall be repurchased on the first business day of the following month after notification of termination at the ruling price of the last NAV. Any proceeds from the termination shall be paid to the investor recorded in this application form.
- For the purpose of this agreement, unless the context indicates otherwise, the singular shall include the plural and vice versa.
- Commission and incentives may be paid and if so, would be included in the overall costs.
- The responsibility of ensuring that the instruction has been received and actioned by FundRock will lie with the instructor (investor or financial advisor).
- No cash payments will be accepted, and a proof of payment must accompany all EFT payments.
- FundRock will not be liable for any damages or losses of whatsoever nature arising out of FundRock's failure to action this instruction due to occurrences beyond the control of FundRock, nor will FundRock be liable for any loss incurred due to incorrect information being supplied by the investor or his/her financial advisor.
- In certain circumstances (such as large redemptions), FundRock may employ ring-fencing, which is the separation of underlying assets in a portfolio and the delayed sale/repurchase of corresponding units. This is done to avoid prejudicing other investors through the sale of assets at weaker prices.
- Copies of all verification documentation requested in this application form and a proof of payment must accompany this application form. FundRock will not be obliged to process this application form until it has received the verification documentation and FundRock will not be liable for any loss or damage of whatsoever nature arising from the inability of FundRock to process this application form due to the fact that the requirements of the FICA have not been complied with.

- The investor indemnifies and holds FundRock harmless against any loss or damage which the investor may suffer as a result of any commission or omission by FundRock, which is a result of an obligation imposed on FundRock by FICA. The investor will not earn interest in the following situations:
 - The instruction provided is incomplete.
 - Funds are deposited into a fund after the cut-off time.
 - Deposits are made on a non-business day (including public holidays, Saturdays, and Sundays). If a debit order collection falls on a non-business day, the collection will occur on the next business day.
 - Deposits into the client deposit account.

Section J: Investor Declaration

- I have read and fully understood all the pages of this application form and agree to be bound by the provisions of this application form.
- I warrant that the information contained herein is true and correct, and that if this application form is signed in a representative capacity, I have the necessary authority to do so and that this transaction is within my powers.
- I am aware of the charges and fees, the total expense ratio, investment objectives, risk factors and income distributions applicable to my investment as set out in this form and in other documentation provided to me.
- I am acting for my own account and that I have made my decision to enter into the investment and as to whether the investment is appropriate for me independently, based upon my own judgment, and upon advice from such advisors as I may deem necessary.
- I declare that I am not relying on any communication from FundRock, whether written, oral or implied as investment advice or as a recommendation to enter into the investment.
- I confirm that all funds invested with FundRock are not the proceeds of unlawful activities and that I have not contravened any anti-money laundering and tax legislation. I have complied with and will continue to comply with all relevant legislation, including but not limited to FICA and the Income Tax Act.
- I have read and understood the terms and conditions.
- I understand that FundRock will only be able to process investments on receipt of funds into the appropriate bank account, proof of deposit, and all relevant FICA documentation.
- I will notify FundRock immediately if my tax residency or FATCA or equivalent classification changes in the future.
- I accept full responsibility for informing FundRock of any changes in current identification information provided (e.g. change of address, surname change, contact, banking details etc.) on the prescribed form.
- I acknowledge that FundRock will not be held liable for delays or losses incurred due to incomplete or inaccurate information on the application forms or insufficient or incorrect submission of FICA information. I also acknowledge that FundRock will not be held liable for delays or losses incurred due to delays caused by the financial advisor.
- I acknowledge that the responsibility in ensuring my instruction has been received and actioned by FundRock lies with me.
- FundRock will not be responsible for any failure, malfunction, or delay of any networks, electronic or mechanical device or any other form of communication used in the submission, acceptance and processing of applications and/or transactions. FundRock will not be liable to make good or compensate any investor or third party for any damages, losses, claims or expenses resulting there from.
- I acknowledge the transaction cut off times set out herein and agree to comply with such cut off times.

- I confirm that FundRock may accept instructions from my financial advisor or any authorised third party who has been appointed and authorised by me in writing.
- I authorise FundRock to accept and act upon instructions by facsimile or e-mail and hereby waive any claim that I have against FundRock and indemnify FundRock against any loss incurred as a result of FundRock receiving and acting on such communication or instruction.
- I acknowledge and give consent that any personal information may be used by FundRock in the normal course of business to provide the products and services and FundRock may retain any information for purposes of investment transactions, processing and administration and to communicate directly with me. Personal information will not be given or sold to any third parties. FundRock will disclose or report personal information if and when required to do so by law or any regulatory authority, and to FundRock’s employees (if relevant), agents or service providers (with whom we have a business agreement) who require such information to carry out their duties.
- I acknowledge by investing in the fund(s) included in this application form that my information may be shared with both FundRock, Co-named/Hosting Investment managers and for any regulatory purposes.
- I have read, received, noted and understood the following information:
 - the Minimum Disclosure Document (MDD);
 - the Effective Annual Cost (EAC)
 - Risk factors
- I consider myself to be, or to be closely related or associated with, a Domestic Politically Exposed Person (PEP) or a Foreign Politically Exposed Person. A Politically Exposed Person is an individual who is or has been entrusted with a prominent public function such e.g. Heads of State or Government, Senior Politicians, Senior Government, Judicial or Military Officials, senior executives of state owned corporations, important political party officials and etc.

Yes

No

If 'Yes,' please provide details:

Mandatory:

Please tick the circle if you have read and agree to all the information mentioned within this Investor Declaration.

Authorised Signature:									
Name of Signatory:									
Capacity:	Date:	d	d	m	m	y	y	y	y



Compliance and Complaints

FundRock takes your concerns and queries very seriously. If you are unsatisfied with the investment or the services received from FundRock, please contact our compliance officer. FundRock will acknowledge the complaint in writing and will inform the investor of the contact details of the persons involved in the resolution thereof. You can obtain our complaints policy and conflict of interest policy from our compliance department.

Contact details:

The Compliance Officer, FundRock Management Company (RF) Proprietary Limited

Post: PO Box 24, Cape Town, 8000.

Email: frcompliance@fundrock.com

If any investor is not satisfied with the response from FundRock, he/she has the right to address his/her complaint in writing to the Ombud of the Financial Services Providers at the address below. The Ombud is legally empowered to investigate and adjudicate complaints in a procedurally fair, economical and expeditious manner.

FAIS Ombud

Website: www.faisombud.co.za

Email: info@faisombud.co.za

Post: FAIS Ombudsman

P.O. Box 74571

Lynnwood Ridge

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Annexure A - Onboarding Checklist

Identification of Entities

Unlisted Companies

South African

- Certificate of incorporation (CM1 or CoR 15.1/CoR 14.1) or any other CIPC document that contains details of the incorporation of the entity, registration number, list of current directors and registered address)
- Copy of Change of Name, if applicable (CM9 or CoR 9.1/2)
- Proof of Operating Business Address
- Proof of Bank Details
- Proof of Income Tax Number
- Board resolution – delegation of Authority to act on behalf of the entity in transacting with FundRock
- Ownership and control structure signed by either the Company Secretary, Director and/or Head of Compliance
- Copy of Identity document for:
 - all directors
 - all authorized signatories
 - all beneficial owners
- Proof of physical address for:
 - all directors
 - all authorized signatories
 - all beneficial owners
- SOF/SOW (application form)
- Nature and Industry type (application form)
- Additional information to be obtained for a LISP: Comfort Letter

Foreign Company

- Official Documents of Incorporation by foreign regulator containing registration number, trading name, board of directors etc.
- Proof of Operating Business Address
- Proof of Bank Details
- Proof of Income Tax Number
- Board resolution – delegation of Authority to act on behalf of the entity in transacting with FundRock
- Ownership and control structure signed by either the Company Secretary, Director and/or Head of Compliance
- Copy of Identity document for:
 - all directors
 - all authorized signatories
 - all beneficial owners
- Proof of physical address for:
 - all directors
 - all authorized signatories
 - all beneficial owners

- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Listed Companies:

- Registration certificate or confirmation of exchange the entity is listed on including ticker
- FICA compliant declaration letter
- Proof of Bank Details
- Proof of Income Tax Number
- Authorized Signatory list containing name of individual, ID number, physical address and specimen signature
- List of Board of Directors containing name of individual, ID number, physical address on company letterhead signed by Company Secretary and/or Head of Compliance
- Ownership and control structure signed by either the Company Secretary, Director and/or Head of Compliance
- Beneficial Owners (where applicable)
 - Copy of identity document
 - Proof of physical address
- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Close Corporation (CC):

- Founding Statement and Certificate of Incorporation (CK1 or as relevant)
- Amended Founding Statement, where applicable (CK2 or as relevant)
- Proof of Operating Business Address
- Proof of Bank Details
- Proof of Income Tax Number
- Board resolution – delegation of Authority to act on behalf of the entity in transacting with FundRock
- Ownership and control structure signed by either the Company Secretary, Director and/or Head of Compliance
- Copy of Identity document for:
 - all members of the CC
 - all authorized signatories
- Proof of physical address for:
 - all members of the CC
 - all authorized signatories
- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Trusts (Inter-Vivos):

- Copy of the Trust Deed or other Founding Document
- A Foreign Trust: an official document reflecting appointment of Trustees issued by an authority in the country where the Trust is created
- Letter of Authority from the Master of the High Court
- Resolution authorising a designated Trustee or person to act on behalf of the Trust
- Proof of Bank Details
- Proof of Income Tax Number
- Copy of identity document for:
 - Trustees
 - Founder/Donor
 - All named beneficiaries
 - All persons authorized to act on behalf of the trust
- Proof of physical address for:
 - Trustees
 - Founder/Donor
 - All named beneficiaries
 - All persons authorized to act on behalf of the trust
- SOW/SOF of the Trust
- Nature of the business relationship

Trusts (Testamentary):

- Copy of will
- Letter of Authority issued by the Master of the High Court that contains the appointed executor
- Identity document for the executor
- Proof of address for the executor
- SOW/SOF (application form)
- Nature of business relationship

FundRock reserves the right to request additional evidential information in relation to above.

Partnerships:

- Copy of Partnership Agreement
- Proof of Bank Details
- Partners resolution – delegation of Authority to act on behalf of the entity in transacting with FundRock
- Ownership and control structure signed by either the Company Secretary, Head of Compliance and/or Partner
- Clear copies of all partner's identity documents, this includes every member of a partnership en commandite, an anonymous partnership or any similar partnership, person who exercises control and authorized person.
- Proof of address for all partner's, this includes every member of a partnership en commandite, an anonymous partnership or any similar partnership, person who exercises control and authorized person
- Proof of Income Tax Number for each partner

- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Pension Funds:

- Copy of Registration Certificate (Authority of Pension Funds)
- Proof of Bank Details
- Proof of physical address
- Trustees' Resolution - delegation of Authority to act on behalf of the pension fund in transacting with FundRock
- Copy of identity document for:
 - Trustees
 - All persons authorized to act on behalf of the pension fund
- Proof of physical address for:
 - Trustees
 - All persons authorized to act on behalf of the pension fund
- SOF/SOW (application form)
- Nature and Industry type (application form)

Note: A list of the Trustees containing name of individual, ID number, physical address on company letterhead signed by Company Secretary and/or Head of Compliance will be accepted. Does not apply to the Principal Officer or any person authorized to act on behalf of the pension fund.

FundRock reserves the right to request additional evidential information in relation to above.

Medical aids:

- Copy of Registration Certificate (Council for Medical Schemes)
- Proof of Bank Details
- Proof of physical address
- Proof of Income Tax Number
- Trustees' Resolution - delegation of Authority to act on behalf of the medical aid in transacting with FundRock
- Copy of identity document for:
 - Trustees
 - All persons authorized to act on behalf of the medical aid
- Proof of physical address for:
 - Trustees
 - All persons authorized to act on behalf of the medical aid
- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Other entities:

- Other legal entities include but not limited to: Burial Societies, Friendly Societies, Schools, Churches, Local Authorities and Government.
- Copy of the constituting, founding document or registration certificate
- Proof of Bank Details
- Proof of physical address
- Proof of Income Tax Number
- Ownership and control structure signed by Company Secretary, Head of Compliance and/or Trustee
- Authority Resolution - delegation of Authority to act on behalf of the entity in transacting with FundRock
- Copy of identity document for:
 - Trustee/Member
 - All persons authorized to act on behalf of the entity
- Proof of physical address for:
 - Trustee/Member
 - All persons authorized to act on behalf of the entity
- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Regulated Portfolios:

- Copy of the Supplemental Deed
- Proof of Bank Details
- Proof of physical address of the Management Company ("Manco")
- Proof of Income Tax Number
- Ownership and control structure signed by either the Company Secretary, Head of Compliance and/or Director/s for the Manco
- Authority Resolution - delegation of Authority to act on behalf of the Manco in transacting with FundRock
- Copy of identity document for:
 - All directors of the Manco
 - All persons authorized to act on behalf of the Manco
 - All beneficial owners
- Proof of physical address for:
 - All directors of the Manco
 - All persons authorized to act on behalf of the Manco
 - All beneficial owners
- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Identification of Estate Late

Estate Late:

- Copy of the Death Certificate
- Copy of the Letter of Executorship
- Copy of identity document for the named Executors
- Proof of physical address for the named Executors
- Proof of Bank Details of the Estate Late
- Copy of the will in instances where we don't distribute the cash to the late estate bank account.
- Where applicable, necessary FICA documents for beneficiaries

We do not need to obtain required FICA documents if the Executor is an Accountable Institution. We do however have to obtain a copy of the Executor/s identity document and a letter confirming they are not acting in their personal capacity.

FundRock reserves the right to request additional evidential information in relation to above.

Identification of Minors

Minors:

- Copy of the Birth Certificate (abridged or unabridged) / Identity document
- Copy of the identity document for the Guardian/Parent/s
- In the case of a guardian, provide documents confirming legal guardianship
- Proof of physical address for the Guardian/Parent/s
- Declaration stating minor resides with the Guardian/Parent/s
- Proof of Bank Details of the minor
- Proof of Income Tax Number of the minor

FundRock reserves the right to request additional evidential information in relation to above.

Identification of Prime Broker

Prime Broker:

- Copy of banking license number (if on the webpage of the prime broker/regulator then a screenshot maybe taken as evidence)
- FICA compliant declaration letter
- Authorized Signatory list containing name of individual, ID number, physical address and specimen signature.
- List of Board of Directors containing name of individual, ID number, physical address on company letterhead signed by Company Secretary and/or Head of Compliance
- Ownership and control structure signed by either the Company Secretary, Director and/or Head of Compliance
- Beneficial Owners (where applicable)
 - Copy of identity document
 - Proof of physical address
- SOF/SOW (application form)
- Nature and Industry type (application form)

FundRock reserves the right to request additional evidential information in relation to above.

Note: Please note that relevant FICA documents must be obtained for all beneficial owners (natural or legal) who hold 5% or more shareholding/ownership of the entity.

Acceptable Verification Documentation

Identity Document

- Clear copy of barcoded identity document (Photo: facial features such as eyes, nose, chin and ears must be clear), full names, date of birth and ID number)
- Clear copy of smart Id Card (front and back)
- Valid passport (not less than 6 months remaining before the passport expires, containing a photo, full names, date of birth and passport number).
- Marriage certificate, where applicable, together with identity document
- Minor's birth certificate (where applicable)
- Any valid identity document in home jurisdiction

Drivers licenses will not be accepted as proof of identity. If a barcoded identity document or a smart Id Card is not available a valid reason as to why such an identity document cannot be provided must be given together with a copy of a valid Passport.

Proof of Address

- Utility bill bearing the client name and residential address (less than 3 months old)
- Bank statement bearing the client name and residential address (less than 3 months old)
- Home loan statement bearing the client name and residential address (less than 3 months old)
- Telkom telephone account bearing the client name and residential address (less than 3 months old)
- Salary advice bearing the client name and residential address (less than 3 months old)
- SA Revenue Services tax return bearing the client name and residential address (less than 12 months old)
- Lease agreement bearing the following details (Valid):
 - Name, particulars and signature of the lessee and the lessor
 - Date/term for which the lease applies
 - Physical address of the property being leased
 - Date the agreement is signed
- Body Corporate/Levy statement bearing the client name and residential address (less than 3 months old)
- Letter on letterhead or CIPC document, signed by board of trustees, directors, company secretary or Head of Compliance confirming physical address
- Proof of registered address of Master of High Court with stamp on letter from authority
- Affidavit from client (as a last resort) providing:
 - Name, identity number and physical address
 - Confirmation that client resides at the physical address
- Letter from bank manager, accountant, attorney, senior management etc (where relevant), on a formal letterhead, stating that they know the client for at least three years or that he/she has visited the client at the address and confirming physical address.

- Vodacom, Cell C, MTN, MWeb etc account (no less than 3 months old).

Original electronic versions of above, where applicable, will be accepted. These documents must however be in a format that is not susceptible to tampering and manipulation.

TV license, clothing accounts or any other invoices will not be accepted as proof of address.

Spouse/partner

Any of above documents for the spouse as proof of physical address, together with:

- copy of the marriage certificate
- letter from the spouse confirming that the client resides at the same address
- the Spouse needs to provide
 - Copy of Identity document

Co-habitant:

- Letter from person co-habiting with client, providing:
 - name, identity number and physical residential address of client and co-habitant
 - relationship between client and co-habitant
 - confirmation that residential address is shared

Parent/s:

- Any of above documents for parents, together with:
 - child's birth certificate (for a minor)

Bank Details:

No third-party bank details will be accepted.

Original electronic versions of above, where applicable, will be accepted. These documents must however be in a format that is not susceptible to tampering and manipulation.

Income Tax Number:

- Documentation issued by SARS (not older than 2 years)
- Letter from an Auditor or a Tax Practitioner (not older than 2 years)
- Payslip on company letterhead (not older than 3 months)

Should the client not have a tax number, the client must provide confirmation that they have applied to SARS for a tax number. On-boarding may continue (low and medium risk clients only) but no withdrawals may be actioned until the tax number have been obtained.