

**CONFIDENTIAL**

To: Client Services  
 Coronation Management Company Limited      Fax: (021) 680 2116  
 PO Box 44684      Email: advisorservice@coronation.co.za  
 Claremont  
 7735

I/We hereby apply for appointment as an Intermediary to promote and market the Selected Products of Coronation. Unless the context indicates otherwise, expressions used herein which are defined in the Terms and Conditions (attached as Annexure A hereto) shall have the same meaning as that set out in the Terms and Conditions.

**A CORPORATE INFORMATION**

Registered Name of Business: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Income Tax Number: \_\_\_\_\_

VAT Number: \_\_\_\_\_ FSP License Number: \_\_\_\_\_  
*(Attach a copy of license and annexure detailing the conditions and restrictions)*

Office Address (Physical): \_\_\_\_\_

Office Address (Postal): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

Business Status:  Sole Proprietor/Natural Person  Pty (Ltd)  Partnership  Close Corporation  Public Company  
 Other (specify): \_\_\_\_\_

Number of years established: \_\_\_\_\_

Current Professional Memberships:


Contracts with other Unit Trusts/Life Companies/LISP's:


Business References (Please specify 3 references):

Contact Name	Company	Telephone Number

## **B** LIST OF REPRESENTATIVES AND KEY INDIVIDUALS OF THE ADVISOR

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

First name(s): \_\_\_\_\_

ID or Passport number (if foreign national): \_\_\_\_\_ *Please attach a certified copy of your ID or Passport*

FSP License Number: \_\_\_\_\_ *(Attach a copy of license and annexure detailing the conditions and restrictions)*

Email Address: \_\_\_\_\_

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

First name(s): \_\_\_\_\_

ID or Passport number (if foreign national): \_\_\_\_\_ *Please attach a certified copy of your ID or Passport*

FSP License Number: \_\_\_\_\_ *(Attach a copy of license and annexure detailing the conditions and restrictions)*

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Email Address: \_\_\_\_\_

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

First name(s): \_\_\_\_\_

ID or Passport number (if foreign national): \_\_\_\_\_ *Please attach a certified copy of your ID or Passport*

FSP License Number: \_\_\_\_\_ *(Attach a copy of license and annexure detailing the conditions and restrictions)*

Email Address: \_\_\_\_\_

*If there are additional advisors, these should be provided on an extra page.*

## **C** INFORMATION REQUIREMENTS AND SUPPORTING DOCUMENTATION

*(Copies of the supporting documentation is sufficient as long as all text and photographs are clear and legible)*

### **PART 1**

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

- Person's full names
- Identity number or passport number for non-SA residents
- Date of birth
- Physical address
- Contact particulars
- E-mail address

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

Copy of ID document (SA residents) / passport (foreign nationals)

Proof of physical address (e.g. bank statement, utility bill or telephone account less than three months old)

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

- Proof of SA income tax number (e.g. any SARS issued document bearing name and tax number)
- Proof of VAT number (e.g. any SARS issued document bearing name and VAT number)
- Proof of registered address (e.g. registration documents)
- Proof of business address (e.g. bank statement, utility bill or telephone account)
- Proof of trading name (e.g. copy of a letterhead)
- Proof of banking details (e.g. bank statement or cancelled cheque less than three months old)
- Copy of FAIS licence including the Addendum

**(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 such other official document for foreign companies
- Copy of Notice of Registered Office and Postal Address (CM22)
- OR**
- Copy of Certificate issued by Registrar of Companies and Close Corporations (CM29)

**(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 such other official document for foreign companies
- Amended Founding Statement (CK2)
- OR**
- Copy of Certificate issued by Registrar of Companies and Close Corporations (CM29)

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

- Constitution or founding document

**PART 2 (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 holder is a natural person:

- Person's full names
- Identity number or passport number for non-SA residents
- Date of birth
- Physical address
- Contact particulars

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

- Registered name
- Trading name
- Legal form
- Contact name
- Registration number (if applicable)
- Registered address
- Business address
- Contact particulars

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

If a natural person:

- Copy of ID document (SA residents) / passport (foreign nationals)

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

- Proof of business address (e.g. bank statement, utility bill or telephone account)
- Proof of registered address (e.g. registration documents)
- Proof of trading name (e.g. copy of a letterhead)

If a company:

- Copy of Certificate of Incorporation (CM1) and Copy 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 other 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

## D PRODUCT SELECTION

Please indicate which products you are applying for:

- Local Unit Trust Funds  
 International Global Opportunities Funds  
 Life and Retirement Products

## E PAYMENT OF FEES

Applicable to local funds:

Instructions for re-investment of fees payable by Coronation Management Company Limited in respect of the Selected Products as referred to in item A (A) 1 of Annexure A of the attached Terms and Conditions.

Please note that only one fund may be selected:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Absolute Fund                    | <input type="checkbox"/> Financial Fund          | <input type="checkbox"/> Global Capital Plus [ZAR] Fund | <input type="checkbox"/> SA Capital Plus Fund |
| <input type="checkbox"/> Balanced Defensive Fund          | <input type="checkbox"/> Global Emerging Markets | <input type="checkbox"/> Jibar Plus Fund                | <input type="checkbox"/> Market Plus Fund     |
| <input type="checkbox"/> Smaller Companies Fund           | <input type="checkbox"/> Flexible [ZAR] Fund     | <input type="checkbox"/> Balanced Plus Fund             | <input type="checkbox"/> Optimal Income Fund  |
| <input type="checkbox"/> Strategic Income Fund            | <input type="checkbox"/> Bond Fund               | <input type="checkbox"/> Global Managed [ZAR] Fund      | <input type="checkbox"/> Optimum Growth Fund  |
| <input type="checkbox"/> Top 20 Fund                      | <input type="checkbox"/> Capital Plus Fund       | <input type="checkbox"/> Industrial Fund                | <input type="checkbox"/> Property Equity Fund |
| <input type="checkbox"/> World Equity [ZAR] Fund of Funds |  | <input type="checkbox"/> Equity Fund                    | <input type="checkbox"/> Resources Fund       |

All funds listed above refer to the A-Class of the respective funds, except for the Bond Fund and Smaller Companies Fund which refers to the R-Class.

Payment of fees for the International Global Opportunities Funds will be paid directly into the intermediary's bank account.

## F LOCAL BANKING DETAILS

These banking details will be used for the local unit trust funds, life and retirement products per the Selected Products listed in items A (A) 1,2, and 3 of Annexure A detailed on the attached Terms and Conditions.

Name of bank: \_\_\_\_\_ Account number: \_\_\_\_\_

Branch name: \_\_\_\_\_ Branch code: \_\_\_\_\_

Type of account:      Current       Transmission       Savings

Name of account holder: \_\_\_\_\_

Signature of investor/authorised person\*: \_\_\_\_\_

\* Please forward proof of authorisation.

Name of authorised person: \_\_\_\_\_

Capacity of authorised person: \_\_\_\_\_

**Please note:** A cancelled cheque or recent bank statement must accompany this application.

Any changes to the banking details must be forwarded in writing to Coronation, together with proof.

Payments will not be made to third-party accounts, including credit cards and money market accounts.

## G OFFSHORE BANKING DETAILS

These banking details will be used for the Global Opportunities Funds per the Selected Products listed in items A (A) 4 of Annexure A detailed on the attached Terms and Conditions.

Bank name: \_\_\_\_\_

Bank address: \_\_\_\_\_  
\_\_\_\_\_

Branch/Sort code: \_\_\_\_\_ Swift code: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_ Account currency: \_\_\_\_\_

### Correspondent Bank Account Details

Bank name: \_\_\_\_\_

Bank address: \_\_\_\_\_  
\_\_\_\_\_

Branch name: \_\_\_\_\_ Branch/Sort code: \_\_\_\_\_

Swift code: \_\_\_\_\_ IBAN: \_\_\_\_\_

Account holder: \_\_\_\_\_

Account number: \_\_\_\_\_ Account currency: \_\_\_\_\_

Signature of authorised person\*: \_\_\_\_\_

*\*Please forward proof of authorisation.*

Name of authorised person: \_\_\_\_\_

Capacity of authorised person: \_\_\_\_\_

**Please note: A cancelled cheque or recent bank statement must accompany this application.**

**Any changes to the banking details must be forwarded in writing to Coronation, together with proof.**

**Payments will not be made to third-party accounts, including credit cards and money market accounts.**

## H DECLARATION

I/We hereby consent, where this is applicable to me/us as registered VAT vendor(s), to the use by Coronation Management Company Limited of self-invoicing, and confirm that I/we will not issue tax invoices, debit notes or credit notes in respect of the fees payable to me/us by Coronation Management Company Limited.

I/We warrant the above information to be correct. Coronation shall not be liable for any loss or damage suffered on account of incorrect information provided by me/us or as a result of a change in my/our information or my/our misrepresentation or my/our involvement in any fraudulent act.

I/We undertake to advise Coronation in writing should any of the details completed herein change subsequent to signature hereof by me/us.

I/We further acknowledge that this Application Form, together with the Terms and Conditions attached hereto as Annexure A, form the basis on which Coronation appoints me/us, and I/we agree to be bound by the said Terms and Conditions.

I/We accept that Coronation may authorise my/our identity via a credit bureau.

I/We accept that Coronation reserves the right to not appoint me/us as Intermediary for whatever reason.

I/We acknowledge and accept that the Agreement will only be concluded when an authorised representative of Coronation has signed this Intermediary Application Form and I/we have received confirmation in writing from Coronation that the Agreement has been concluded.

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Name: \_\_\_\_\_ Capacity: \_\_\_\_\_

Authorised signatories: \_\_\_\_\_

## I ACCEPTANCE BY CORONATION – FOR OFFICE USE ONLY

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Capacity: \_\_\_\_\_ Capacity: \_\_\_\_\_

Signed: \_\_\_\_\_ Approved: \_\_\_\_\_