

- Please send the completed form and documentation to **086 677 0007 (fax)** or **transact@coronation.co.za**
- Should you have any queries kindly call us on **0800 22 11 77** or email **clientservice@coronation.co.za**

A: TRANSFER OF CLIENTS BETWEEN ADVISERS WITHIN THE SAME ADVISORY



If the Transferee Financial Adviser does not have a Coronation adviser number then please submit a Financial Advisory and Additional Adviser form.

Trading name: _____

Registration number: _____ FSP license number: _____

We hereby grant approval to Coronation to transfer clients between advisers within the same advisory. All affected clients have been notified of this change and have provided their consent to the change. We have complied with all of the requirements as set out in the FAIS Act and further complied with any other legislation that may be applicable.

Retain existing ongoing advice fee structure? Yes No

If NO, please submit an Financial Adviser Fee Change Form.

Suppress communication to clients? Yes No

DETAILS OF FINANCIAL ADVISER (TRANSFERRING)

- | | |
|--|-----------------------|
| <input type="checkbox"/> South African Unit Trust Funds and Tax-Free Investments | Adviser number: _____ |
| <input type="checkbox"/> Offshore Investment Funds | Adviser number: _____ |
| <input type="checkbox"/> Life and Retirement Products | Adviser number: _____ |

Title: _____ Surname: _____

First name(s): _____

ID or Passport number (if foreign national): _____

Please indicate by making an election below?

- All clients linked to above Financial Adviser need to be transferred
- Refer to the attached client list
- Only the clients listed on the following page are to be transferred



CLIENT LISTING

INVESTMENT NUMBER	FULL NAME

DETAILS OF FINANCIAL ADVISER (TRANSFEREE)

- South African Unit Trust Funds and Tax-Free Investments Adviser number: _____
- Offshore Investment Funds Adviser number: _____
- Life and Retirement Products Adviser number: _____

Title: _____ Surname: _____

First name(s): _____


ID or Passport number (if foreign national): _____

Signature of authorised signatory*:
* Please forward proof of authorisation

SIGN WITHIN THE BOX



B: TRANSFER OF CLIENTS BETWEEN TWO DIFFERENT ADVISORIES

 If the Transferee Financial Advisory does not have a Coronation advisory number then please complete and submit a Financial Advisory and Adviser application form.

We hereby grant approval to Coronation to transfer clients between two different advisories. This instruction is limited to all client accounts to where the financial adviser is recorded as the appointed advisor. All affected clients have been notified of this change and have provided their consent to the change. We have complied with all of the requirements as set out in the FAIS Act and further complied with any other legislation that may be applicable.

Reason for transfer: _____

On a company letterhead please provide full reason for transfer (compulsory)

Retain existing ongoing advice fee structure? Yes No

If NO, please submit an Financial Adviser Fee Change Form.

Suppress communication to clients? Yes No

If YES, please submit a sample advisory/adviser change letter.

Furthermore, on a company letterhead please confirm that all clients were communicated of this change

DETAILS OF FINANCIAL ADVISORY (TRANSFERRING)

Trading name: _____

Registration number: _____ FSP license number: _____

Local Unit Trust Funds and Tax-Free Investments Adviser number: _____

International Global Opportunities Funds Adviser number: _____

Life and Retirement Products Adviser number: _____

Title: _____ Surname: _____

First name(s): _____

ID or Passport number (if foreign national): _____

Please indicate by making an election below?

All clients linked to above Financial Adviser need to be transferred

Refer to the attached client list

Only the clients listed on the following page are to be transferred



CLIENT LISTING

INVESTMENT NUMBER	FULL NAME

DETAILS OF FINANCIAL ADVISORY (TRANSFEREE)

Trading name: _____

Registration number: _____ FSP license number: _____

- Local Unit Trust Funds and Tax-Free Investments
- Offshore Global Opportunities Funds
- Life and Retirement Products

Adviser number: _____
Adviser number: _____
Adviser number: _____

Title: _____ Surname: _____

First name(s): _____

ID or Passport number (if foreign national): _____

Transferring authorised signatory*: _____
* Please forward proof of authorisation

SIGN WITHIN THE BOX

Transferee authorised signatory*: _____
* Please forward proof of authorisation

SIGN WITHIN THE BOX



C: REMOVAL OF AN ADVISER FROM AN ADVISORY

| Please complete this section if you would like to remove any Financial Adviser we have on record who is no longer employed by your advisory.

Trading name: _____

Registration number: _____ FSP license number: _____

- Local Unit Trust Funds and Tax-Free Investments Adviser number: _____
- Offshore Global Opportunities Funds Adviser number: _____
- Life and Retirement Products Adviser number: _____

Title: _____ Surname: _____

First name(s): _____

ID or Passport number (if foreign national): _____

Reason for termination: _____

| When removing a Financial Adviser from this advisory please ensure no clients are linked to this Financial Adviser. If clients are linked to the Financial Adviser please complete either Sections A or B of this form.

Signature of authorised signatory*:
* Please forward proof of authorisation

SIGN WITHIN THE BOX

D: DECLARATION

I/We:

- ▶ declare that I/we am/are a licensed Financial Service Provider(s) and have made the disclosures required in terms of the Collective Investment Schemes Control Act, 2002, and the Financial Advisory and Intermediary Services Act of 2002, and subordinate legislation thereto, to the investor.
- ▶ acknowledge and confirm that, in my/our capacity as the primary accountable institution with Coronation being the secondary accountable institution, I/we have established and verified the identity of the client in accordance with Section 21 of the Financial Intelligence Centre Act, 2001 ("the Act"), and will keep records of such identification and verification according to the provisions of Section 22 of the Act.
- ▶ warrant that I/we have explained all fees that relate to this investment to the investor and I/we understand and accept that the investor may withdraw his/her authority for payment to me/us in writing to Coronation.
- ▶ 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.
- ▶ undertake to advise Coronation in writing should any of the details completed herein change subsequent to signature hereof by me/us.

Signed at: _____ on this _____ day of _____ year _____

Signature of authorised signatory*:
* Please forward proof of authorisation

SIGN WITHIN THE BOX