

TRANSFER OF OWNERSHIP (OUTRIGHT CESSION) Endowment Plan



Coronation Life Assurance Company Limited | SARS Registration Number 1999/005510/06

- Initial any amendments made to this application form.
- Ensure that all information provided is accurate.
- No instruction will be processed unless all requirements have been met.
- The daily cut-off for receipt of instructions is 14h00.
- Completed forms are to be faxed to us on (021) 680 2250 or e-mailed to eflows@coronation.co.za.
- Should you have any queries regarding this application, please contact the Coronation Client Service Centre on 0800 22 11 77.

As a security measure, a consultant from Coronation will call you to get your personal authorisation to process this instruction. This transaction may attract Capital Gains Tax; please discuss the implications of this with a tax adviser.

Client number: 104104			Investment number:		
/Passport/Registration	n/Trust number:				
ontact telephone num	ber: ()		E-mail address:		
We hereby cede and a	ssign all my/our rights, o	bligations and c	ownership under this policy as fo	ollows to the cessionary	detailed below:
Name of Fund/s	No. of Units	Rands	Name of Fund/s	No. of Units	Rands
kisting debit orders (if a	applicable) will be cance	lled.			
ate capacity if an auth	orised signatory:				
understand that:					
inderstand triat.					
			entitled to benefits from this pour urance Company to note the tra		s policy.
By signing this docum		n this	day of	year	
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B DETAILS OF CESSIONARY
The cessionary must complete a new application form.
Surname/Trust/Company name:
First name(s):
Unitholder number: 104104
Company registration/Trust number:
ID/Passport/Registration/Trust number:
Signed at on this day of year
Signature of new investor: Capacity: