



## Additional Investment Application Form

### 1. BEFORE YOU INVEST

## Completing the form

#### DOWNLOAD AND COMPLETE THE FORM AND AGREE TO THE T&C'S

1. Please read the [Terms and Conditions](#) and the Minimum Disclosure Document (MDD).
2. Complete all relevant sections, and send it together with the required documents to Prescient via e-mail [pmancoadmin@prescient.co.za](mailto:pmancoadmin@prescient.co.za)
3. Cut-off times for receiving instructions are 13:00, except for Money Market funds where the cut off time is 11:00.

#### SUPPORTING DOCUMENTS

The following must be submitted with this application:

Proof of Deposit

#### HAVE ANY OF YOUR DETAILS CHANGED?

If yes, please provide updated proof.

Address

Bank Account Details



## Additional Investment Application Form

### 2. INVESTOR DETAILS

Additional Direct Investment

Additional Tax Free Savings Investment.

Name / Registered Name \_\_\_\_\_

Client number \_\_\_\_\_

### 3. ACTING ON BEHALF OF INVESTOR \* (TO BE COMPLETED IF GUARDIAN OR POA HAS CHANGED)

\* This is for Guardians/Parents, or persons with Powers of Attorney. Proof of authority and supporting FICA required.

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

First name(s) \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Date of birth \_\_\_\_\_ Nationality \_\_\_\_\_

ID or Passport Number (if Foreign National) \_\_\_\_\_

Income Tax number \_\_\_\_\_

Street Address	Postal Address		
c/o _____	Same as Street Address	Yes	No
Unit _____	c/o _____		
Complex _____	Line 1 _____		
Street Number _____	Line 2 _____		
Street _____	Line 3 _____		
Suburb _____	Line 4 _____		
City _____	Postal code _____		
Postal code _____	Country _____		
Country _____			
Telephone (H) _____	Fax _____		
Telephone (W) _____	Cell _____		
Email Address _____	Capacity _____		



## 4. SOURCE OF FUNDS INVESTED (INDIVIDUALS)

Savings	Retirement/insurance pay out	Passive Income (rental, dividends, interest)	Trade/business	Sale of assets
Winnings	Gifts/inheritance/donations	Child/spousal support payments	Salary/bonus	Tax refund
Other (please specify) _____				

Please note that in certain circumstances we may request additional information.

## 5. SOURCE OF FUNDS INVESTED (LEGAL ENTITIES & TRUSTS)

Tax Refund	Investment/Insurance pay out	Passive Income (rental, dividends, interest)	Venture capital
Trust donor	Savings	Sale of assets	Donations
Other (please specify) _____			

Please note that in certain circumstances we may request additional information.

## 6. INVESTMENT OPTION DETAILS

Please complete the table below once you have made your selection from the latest Investment Option Brochure.

**For Unit Trust - Minimum investment of R500 per month OR R3 000 as lump sum.**

**For TFSA - DEBIT ORDER - Minimum investment of R500 or maximum of R3 000 per month OR**

**LUMP SUM - Minimum investment of R3 000 or maximum investment per tax year of R36 000**

- I hereby apply to purchase units in the selected portfolios subject to the conditions of the relevant Supplemental Deed at the ruling fund prices.
- The Manager does not charge an initial fee.
- The [annual management fee](#) is the fee charged by the Manager for managing and administering the fund.
- Fees exclude VAT.

Unit Trust Portfolio	Annual Management Fee (%)	Investment Amount (R)	Debit Order (R)	Re-invest distributions?*'Yes' 'No'
Long Beach Worldwide Flexible Prescient Fund - A1	1.25%	R	R	
Long Beach Managed Prescient Fund - A1	1.25%	R	R	
		R	R	

\* If you selected to have your distributions paid out, they will be paid into the bank account specified. If your distribution is below R1 000 or no selection is made, your distribution will automatically be re-invested.

## 7. SPECIAL FEE INSTRUCTIONS

In the event that a special fee arrangement has been entered into with us, please indicate such arrangement below.

Unit Trust Portfolio	Fee Class	Agreed with

## 8. METHOD OF PAYMENT

### LUMP SUM

Bank account details can be found on your welcome letter. Please contact us if you require these to be resent.

### ELECTRONIC COLLECTION / DEBIT ORDER

I hereby authorise the Manager to deduct the stated amount for the investment from the bank account above. I/we agree to pay bank charges and costs incurred by this electronic collection or debit order. Any debit order amendment must be received in writing by the Manager prior to the 7<sup>th</sup> day of the month in order for it to be acted upon in the following month.

Electronic Collection	Funds are deducted from the investor's bank account on the receipt of this application form and all supporting documentation. Electronic collection by the Manager is restricted to a maximum of <b>R1 000 000.00</b> per debit. Where a higher amount than this is requested, multiple debits will be processed daily.		
	Commencement date		
Regular Debit Order	Funds are deducted from the investor's bank account on the <b>1<sup>st</sup> working day</b> of each month.		
	Commencement month/year	Annual Escalation	%

**Please note: Funds invested via electronic collection or debit order may not be redeemed until after 40 days from the date on which such funds were invested into units on your behalf.**

### BANKING DETAILS FOR DEBIT ORDER DEDUCTION/ELECTRONIC COLLECTION (IF DIFFERENT FROM INVESTOR'S BANK DETAILS):

Name of Account Holder	
Bank	
Branch Name	
Branch Code	
Account Number	
Account Type	

**Please note: Proof of ID and proof of bank account details required for account holder**

Signature of Account Holder \_\_\_\_\_

## 9. FINANCIAL ADVISOR DETAILS (IF APPLICABLE)

If there have been any changes to your financial advisor, or, you want to add a new advisor please complete the [Static Data Amendment Form](#)



## AUTHORISATION AND DECLARATION

1. I have read and fully understood all the pages of this application form and agree to the Terms and Conditions of this investment into the Unit Trust Option(s) and I understand that this application and any further documents, read with the Supplemental Deed, constitutes the entire agreement between the Prescient Management Company (RF) (Pty) Ltd ("the Manager") and me.
2. I warrant that the information contained herein is true and correct and that where this application is signed in a representative capacity, I have the necessary authority to do so and that this transaction is within my power.
3. 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.
4. I authorise the Manager to deduct any debit orders, electronic collections, any applicable taxes and also to pay all fees. If the additional annual advisor fees are insufficient to pay the Financial Advisor (FSP) from one portfolio, the Manager will sell units proportionately from the portfolios and pay the amounts to the advisor monthly. Permissible deductions from the portfolio include management fees, performance fees, bank charges, trustee/custodian, audit fees, securities transfer tax and brokerage.
5. I acknowledge that the responsibility in ensuring my instruction has been received and actioned by the Manager lies with me.
6. I acknowledge that the Manager will not be liable for any damages or loss of whatsoever nature arising out of the Manager's failure to action my instruction due to any occurrences beyond the control of the Manager, nor will the Manager be liable for any loss incurred due to incorrect information being supplied by myself or by my advisor or agent sending completed documentation to the incorrect mailbox.
7. I acknowledge the transaction cut off times set out herein and agree to comply with such cut off times.
8. I acknowledge the inherent risk associated with the selected Unit Trust Option(s) and that there are no guarantees.
9. I understand and agree that no part of the services provided by the Manager constitutes a solicitation, recommendation, guidance or proposal, nor does it constitute financial, tax, legal, investment or other advice. I warrant to the Manager that I am acting for my own account, I have made my own independent decisions to enter into the investment and as to whether the investment is appropriate or proper for me, based upon my own judgement and upon advice from such advisors as I may deem necessary. I warrant that I am not relying on any communication from the Manager, whether written, oral or implied as investment advice or as a recommendation to enter into the investment; it being understood that information and explanations relating to the terms and conditions of an investment shall not be considered investment advice or a recommendation to enter into the investment. I warrant that I have not received from the Manager any assurance or guarantee as to the expected results of the investment.
10. I understand that the Manager will accept instructions from my FSP only if duly appointed and authorised in writing by me. The Manager will not be held liable for any losses that may result from unauthorised instructions given to the Manager by my FSP.
11. I hereby authorise the Manager to furnish written reports to my duly appointed FSP, if applicable.
12. If I have appointed an FSP I authorise the payment of the negotiated fees to be paid to my FSP from my portfolios. This authority to pay fees may be withdrawn by written notice to the Manager.
13. I authorise the Manager to accept and act upon instructions by facsimile or e-mail and hereby waive any claim that I have against the Manager and indemnify the Manager against any loss incurred as a result of the Manager receiving and acting on such communication or instruction.
14. SARS requires the Manager to pay over dividend tax on your behalf where applicable. The Manager will deduct this tax before it pays any dividends or re-invests these into your investment account. Unless the Manager receives information from you indicating otherwise, accounts held by South African trusts, companies and partnerships will attract the default Dividend Tax (DT).
15. Any 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 and share 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 the Manager's employees (if relevant), or agents who require such information to carry out their duties. I/we consent to the processing of my/our personal information/data and the disclosure of my/our personal information/data to any tax authority and/or as may be required to comply with FATCA and the Common Reporting Standard (CRS) as explained in the Terms and Conditions and the Compulsory Foreign Tax Declaration and Self-Certification attached hereto. I consent to the Manager making enquiries of whatsoever nature for the purpose of verifying the information disclosed in this application and I expressly consent to the Manager obtaining any other information concerning me from any source whatsoever to enable the Manager to process this application.
16. I confirm that I have received, noted and understood the following information:
  - a. the Minimum Disclosure Document
  - b. investment objectives and risk factors
  - c. the calculation of the Net Asset Value (NAV), dealing prices and distribution of income accruals
  - d. any additional information necessary to enable the investor to make an informed decision.



17. I consider myself or the entity or any of its related parties or close relatives or close associates to be, or to be related to or closely associated with; a [Domestic Politically Exposed Person\(s\)](#) and/(or) a [Foreign Politically Exposed Person\(s\)](#) as defined in Schedule 3A and 3B respectively of the Financial Intelligence Centre Act, as amended.

Yes                      No

If Yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_

**Please note: It is the client's responsibility to disclose to Prescient should this status change**

Signed at \_\_\_\_\_ Date \_\_\_\_\_

Full name of signatory \_\_\_\_\_ Capacity \_\_\_\_\_

Authorised Signatory \_\_\_\_\_

Signed at \_\_\_\_\_ Date \_\_\_\_\_

Full name of signatory \_\_\_\_\_ Capacity \_\_\_\_\_

Authorised Signatory \_\_\_\_\_

## THANK YOU

---

You have completed this application form. Please collate all your required FICA documentation to include in your submission.



## CONTACT PRESCIENT MANAGEMENT COMPANY (RF) (PTY) LTD

Physical Address	Prescient House, Westlake Business Park, Otto Close, Westlake, 7945
Postal Address	P.O. Box 31142 Tokai 7966
Toll Free	+27 800 111 899
Reception	+27 21 700 3600
E-mail	<a href="mailto:pmancoadmin@prescient.co.za">pmancoadmin@prescient.co.za</a>
Website	<a href="http://www.prescient.co.za">www.prescient.co.za</a>

## CONTACT LONG BEACH CAPITAL (PTY) LTD

Physical Address	Block B, Silverwood, Silverwood Lane, Steenberg Office Park, Tokai, 7945
Postal Address	P.O Box 31142 Tokai 7966
Telephone	+27 800 111 899
E-mail	<a href="mailto:info@longbeachcapital.co.za">info@longbeachcapital.co.za</a>
Website	<a href="http://www.longbeachcapital.co.za">www.longbeachcapital.co.za</a>

## COMPLIANCE DEPARTMENT

Compliance Officer	Charmaine Tew
Physical Address	Prescient House, Westlake Business Park, Otto Close, Westlake, 7945
Postal Address	P.O. Box 31142 Tokai 7966
Toll Free	+27 800 111 899
Reception	+27 21 700 3600
E-mail	<a href="mailto:compliance@prescient.co.za">compliance@prescient.co.za</a>
Website	<a href="http://www.prescient.co.za">www.prescient.co.za</a>

## COMPLAINTS

Please do not hesitate to contact us if you are not satisfied with this investment or the services received from Prescient. A complaint must be submitted to the Compliance Officer. Prescient will acknowledge the complaint in writing and will inform the investor of the contact details of the persons involved in the resolution thereof. Should you wish to lodge a complaint regarding the services being provided, an email can be sent to [complaints@prescient.co.za](mailto:complaints@prescient.co.za) or alternatively you can obtain our complaints policy, conflict of interest policy from the compliance department (address above).

Should you have a complaint related to the advice given by your financial advisor, please submit this complaint directly to your financial advisor. If an investor is still not satisfied with the response from the Financial Advisor, he/she has the right to address his/her complaint in writing to the Ombud for 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.

Postal Address	P.O. Box 74571 Lynnwood Ridge 0040
Telephone	+27 12 470 9080
Fax	+27 12 348 3447
E-mail	<a href="mailto:info@faisombud.co.za">info@faisombud.co.za</a>