

COMPLETE FOR EACH CONNECTED INDIVIDUAL:

Account nr (investment / policy): _____

- Representative (acts on behalf) of the natural person.
- Beneficial Owner of the natural person.

- ✓ Representative (acts on behalf) of the company;
- ✓ Majority shareholder (including nominee shareholder) of the company;
- ✓ Chief Executive Officer (managing director) of the company;
- ✓ Director (including nominee director) of the company;
- ✓ Executive Manager of the company; and
- ✓ Beneficial Owner of the company.

- Representative (acts on behalf) of the close corporation;
- Executive Manager of the close corporation;
- Member of the close corporation; and
- Beneficial Owner of the close corporation.

- ❖ Representative (acts on behalf) of the partnership;
- ❖ Partner (including silent partner & partner *en commandite*) of the partnership; and
- ❖ Beneficial Owner of the partnership.

- Representative (acts on behalf) of the trust;
- Founder of the trust;
- Trustee of the trust;
- Protector (if any);
- Beneficiary (including each not referred to by name) of the trust; and
- Beneficial Owner of the trust.

- Representative (acts on behalf) of the entity;
- Member of the governing body of the entity; and
- Beneficial Owner of the association / entity.

- * Beneficiary (being an individual).

A. INFORMATION REQUIRED:

1. <i>Capacity of individual</i> (e.g. Representative of the Close Corporation):
2. Full names of individual:
3. Surnames of individual:
4. Nationality (country of birth) of individual:
5. ID nr / Valid Passport nr of individual. Date of birth (minor only):
6. <i>Occupation:</i>
7. <i>Source of funds (e.g third-party payer):</i>
8. <i>Residential address of individual (street number, street name, town/city, country):</i>
9. <i>Contact details:</i>

B. VERIFICATION DOCUMENTS REQUIRED:

- 1 **Identity Document; or**
 Valid Passport.
- 2 **If applicable, Birth Certificate - minor (below the age of 18 years) only.**

Declaration:

I, _____ (full names and surnames): hereby confirm that the above information is true and correct.

_____ **Signature**

_____ **Date**

or declaration by intermediary (Broker / Person contracted by Sanlam Allianz / Sanlam Allianz employee):

I, _____ (names and surnames) with ID nr: _____ and with Sanlam Allianz code: _____, hereby confirm that I have established the identity of this person as required by the FIA. I have seen the original (or certified copies of the original) verification documents.

_____ **Signature**

_____ **Date**