

APPLICATION FORM: TRUST INVESTOR

FORMS

Please send the completed form, annexures and supporting documents to forms@rezco.co.za

ENQUIRIES

For enquiries, please contact us at:

Email: info@rezco.co.za Tel: 041 581 1525

IMPORTANT INFORMATION

- The full application comprises of this Application Form (with relevant Annexures) and the Fund Annexure (provided separately) for the relevant Rezco fund(s) in which you want to purchase a participatory interest.
- The Investment Terms and Conditions form part of this Application Form and can be accessed at the following link: https://www.rezco.com/legal.

INVESTOR DETAILS

General Details		
Trust Name		
Registration Number		
Type of Trust		
Purpose of Trust		
Registered Address	Postal Code	
Contact Number 1		
Contact Number 2		
Email Address 1		
Email Address 2	 	
	 	•

Required verification documents

Required information/documents:

- Copy of the Trust Deed.
- Copy of the Letter of Authority / Endorsement confirming the current Trustees' appointment.
- Proof of address in the name of the Trust not older than 3 months.

Tax status		
Country where the corporate is registered for tax	;	
Tax reference number		
FATCA status (confirmation)	The trust is not a Specified US person for tax purposes	
	The trust is a Specified US person for tax purposes	
Beneficial Owners (Founder, T	rustees, Beneficiaries) of the Trust	
A completed Annexure B: Ben	eficial Owner for each beneficial owner of the Trust	
BANK DETAILS (REDEMPTIO RCI will only make payments intermediate market, bond or policy accounts	to the account of the investor. No payments to third parties, nor into credit cards,	money
Bank Name	.	
Account Name		-
Account Number		
Type of Account		
Branch Code		

Please supply us with proof of banking details not older than three months for this account.

Banking details into which your investment sum must be paid via electronic fund transfer (EFT) will be provided once all the required FICA documentation has been received.

DECLARATION

- I/We have read through and understand the content of this Application Form together with complementing Annexures and the Investment Terms and Conditions, and agree to be bound thereby.
- > I/We confirm that the information provided in this Application Form and complementing Annexures is true and correct.

	Name:
AUTHORISED SIGNATORY	Signature:
	Name:
CO-SIGNATORY (if applicable)	Signature:
DATE	

ANNEXURE A: BENEFICIAL OWNER

Identification												
Founder												
Trustee												
Beneficiary												
General Details											·	
Title		Surname										
First Name(s)												
Date of Birth												
Identity or Passpo	ort Number											
Desidential Addres												
Residential Addres	SS						Post	al Co	de			
Tax Status												
Country of reside purposes	ence for tax											
Tax reference nur	nber											
Is the beneficial owner a tax payer of any country other than the primary country of residence?												
If "YES", please specify and provide the relevant tax reference number												
Country:		Tax No:										
Country:		Tax No:										
FATCA status (co	nfirmation):	not a US persor	n for	tax purposes		a US	pers	on fo	r tax pı	ırpose	es	
Required verification documents												
		entity Document/P e of the beneficia			ın 3 m	onths;						
Politically exposed	d person (PEP)											
Is the beneficial owner, by nature of his/her occupation or otherwise, a PEP? Yes No												
If "YES", please specify:												
Is the beneficial owner associated with a PEP? Yes No				No								
If "YES", please s	pecify:											