

JOINT HOLDER DETAILS

Title:

First Name(s):

Surname:

Gender: M F Date of Birth: D D M M Y Y Y Y

Minor: Y N Guardian Name:

Guardian Relationship:

Marital Status: In community of property Antenuptial contract Married according to customary law
Single Divorced Widowed

Employer: Occupation:

Politically Exposed: Investor Y N

JOINT HOLDER CONTACT DETAILS

Postal contact details same as Investor Residential contact details same as Investor

Postal Address:

Postal Code:

Mobile/Cell phone: Work Telephone:

Work Email: Work Fax:

Residential Address:

Postal Code:

Home Telephone Number: Home Fax:

Home Email:

Preferred address for communication: Postal Email

Nationality: SA Resident: SA Non Resident:

Identification Type: ID Passport No:

Income Tax No: Country of residence for Tax purposes:

SARS Tax Office: Either party can sign instructions: Both parties must sign ALL instructions:

PERSON ASSISTING OR NOMINATED BY SIGNATORIES TO OPERATE THE ACCOUNT

(If applicable)

Legal Capacity:

Id. No/ Passport No: Date of Birth: D D M M Y Y Y Y

Title: First Name(s):

Surname:

Residential Address:

Postal code:

Telephone Number: Mobile/Cell phone:

Fax: Email:

Employer: Occupation:

Politically Exposed: Investor Y N Either party can sign instructions: All parties must sign ALL instructions:

INVESTOR BANK DETAILS

Account type: Current/Cheque Savings Transmission

(Payments will only be paid to the bank account specified hereunder. Payments will not be made into third party bank accounts)

Name of bank:

Branch name: Account number:

Branch code: Name of account holder:

ADDITIONAL INVESTOR INFORMATION

Where have you heard about Oasis:

Religion: Islam Christianity Hinduism Judaism Other

Source of Funds: Income: Inheritance: Savings: Other

Politically Exposed: Y N Employer:

Occupation:

INVESTMENT OPTIONS

PROOF OF LUMP SUM PAYMENTS WITH APPLICATION AND FICA DOCUMENTS MUST PLEASE BE FAXED TO: + 27 - 21- 413 7920 OR EMAILED TO: t-a@za.oasiscrescent.com

The minimum lump-sum investment amount for the Oasis Money Market Fund is R5000 and for all other funds, the minimum lump-sum investment amount is R2000. The minimum monthly investment for all funds is R500.

OASIS CRESCENT RANGE (CLASS D)	LUMP SUM INVESTMENT	MONTHLY INVESTMENT	CASH FLOW PLAN	BANKING DETAILS Bank Account Name = Fund Name
Oasis Crescent Equity Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 126 550
Oasis Crescent Int Feeder Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 157 553
Oasis Cres Int. Property Equity Feeder Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 049 874
Oasis Cres Int. Balanced Low Equity Feeder Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 368 821
Oasis Crescent Income Fund (Class A)	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 473 900
Oasis Cres Balanced High Equity Fund of Funds	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 473 919
Oasis Cres Balanced Progressive Fund of Funds	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 220 190
Oasis Cres Balanced Stable Fund of Funds	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 473 927

NON-PERMISSIBLE INCOME

I confirm and understand that the product being offered is a Shari'ah compliant product. It has been explained to me that any non-permissible income is removed from the fund on a daily basis and does not form part of the portfolio. (Further information on Shari'ah compliance can be found on the website www.oasiscrescent.com).

Signature of Investor

OASIS RANGE (CLASS D)	LUMP SUM INVESTMENT	MONTHLY INVESTMENT	CASH FLOW PLAN	BANKING DETAILS Bank Account Name = Fund Name
Oasis General Equity Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 157 545
Oasis Property Equity Unit Trust Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 095 906
Oasis Balanced Unit Trust Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 059 195
Oasis Balanced Stable Fund of Funds	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 043 817
Oasis Bond Fund	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 063 222
Oasis Money Market Fund (Class B)	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	R <input type="text"/> , <input type="text"/>	Standard Bank-Cape Town Branch: 020909 Account number: 070 157 561

CASH FLOW PLAN (Cash flow plans are only offered on a monthly frequency)

Total Cash Flow Plan Amount: R

Date of Payment: 1st 7th 15th 25th Year to commence:

INCOME OPTIONS

Month to commence:

Please confirm how Income Distributions are to be paid.

Reinvestment in Units: Pay directly to the Bank account detailed:

INVESTOR DECLARATIONS (Investor to specify the agreed to PERCENTAGE fee, excluding VAT)

The initial advice fees are payable to the IFA by the Management Company on behalf of the Investor. The Management Company will ensure that the initial advice fee is paid when the initial investment or transfer amount in respect of the Investor is received by the Management Company, and thereafter the annual advice fee will be paid by the way of realizing units from the investment portfolio of the Investor. I confirm that the Financial Advisor is my nominated IFA and agree that the following fee is payable.

Fee Type	Financial Advisor	Agreed Fee	
Initial	Maximum 3% deducted prior to each investment being made. Where ongoing fee is greater than 0.5% then initial fee is limited to 1.5%.	Lump Sum	%
		Debit Order	%
Ongoing	Maximum 1% per annum of the investment account. Where the initial fee is more than 1.5% then the maximum ongoing fee is 0.5%.		%

FINANCIAL ADVISORS DETAILS AND DECLARATIONS

FSP Name: Oasis Broker code:

Representative Name: FSP No:

The IFA undertakes to ensure that when dealing with the Management Company all requirements of the Management Company shall be adhered to and the IFA accepts that he/she has complied with such requirements in relation to this transaction. This includes the provision of documentation relating to the registration of the IFA, the authorisation of the IFA to advise on the selected products and documentation required pertaining to the respective products. The IFA confirm that the necessary Needs Analysis has been done and the selected product meets the financial objectives of the Investor and that a record of such advice has been undertaken and such records are maintained by the IFA. The IFA confirms that he/she has made the disclosures required in terms of the FAIS Act with the Management Company to the Investor; and that all fees that relate to this investment have been disclosed and explained to the Investor; and accepts and understands that the Investor may instruct the Management Company to cancel or amend such fees at any time. The IFA accepts that the latest instruction of the client will supersede previous instructions of the client. The IFA confirms that as an accountable institution in terms of Financial Intelligence Centre Act it has accordingly identified all the parties to this transaction and shall maintain all records relating thereto which records shall be updated upon any changes occurring. The IFA undertakes to keep the investor informed of the process and status of this transaction.

Signature of Financial Advisor

- I confirm that the Financial Advisor has been appointed by me.
- I warrant that the information contained herein is true, correct and complete;
- I have attained the age of majority in terms of the law applicable to me and that there are no legal restrictions preventing me from entering into this agreement without the consent of my parent/legal guardian;
- I have the necessary authority to sign this application in a principal capacity, or a representative capacity and do so within my power granted by my principal;
- I hereby permit the Management Company to conduct any investigation to verify that the information and documentation included in/with this application is correct, and in the case where such investigation results in conflicting information, that the Management Company is obliged to report the transaction as a suspicious transaction to the relevant authorities;
- I understand that it is my obligation to familiarise myself with, and accept the risks associated with this investment;
- I confirm that the information about the product, (including the Key Investor Information document) investment objective and risk factors have been provided and disclosed to me by my Financial Advisor and that any other additional information that I have required, has been provided;
- I confirm that the information about the product, investment objective and risk factors have been provided and disclosed to me by my Financial Advisor and that any other additional information that I have required, has been provided;
- I have read understood and agree to the Terms and Conditions, Performance Fee FAQ's and Fund Summary;
- I acknowledge that I have fully acquainted myself with the Conflict of Interest and Complaints Disclosures set out in the Terms and Conditions and that I have read, understood the disclosures.
- I hereby confirm that the details of the financial advisor contained in this application, are those of my appointed Financial Advisor, and agreement has been reached for payment of the fees as set out in this application;

12. I understand that The Management Company will only accept instructions, from a Financial Advisor or Third Party, if authorised by myself in writing;
13. I confirm that the information pertaining to my account (including duplicate statements, valuations and other information that may be required from time to time) may be released, electronically or in hard copy, to my appointed Financial Advisor;
15. I have not received advice from The Management Company;
15. I warrant that in respect of this investment I have not contravened any anti-money laundering legislation and regulations applicable to me;
16. I permit The Management Company to pass on my information and documentation to any of its associated/partner companies for research purposes as well as any compliance in respect of the provisions of Financial Intelligence Centre Act, 2001, and to use such information in respect of any communication that the associated/partner companies may wish to bring to my attention.
17. Protection of Personal Information Act, 2013 ("POPI") – I confirm that I am aware that The Management Company and/or its associated/partner companies are "responsible parties" as defined in POPI, and I hereby consent to my personal information being processed in compliance with POPI. (Further information on POPI compliance can be found on the website www.oasiscrest.com.)
18. I hereby waive any claim, of whatsoever nature, I may have against The Management Company, in future, relating to or arising out of the investment/s described in this application form, save insofar as it arises from dishonesty, theft or gross negligence of The Management Company's employees, agents or representatives.
19. I confirm that I have received the Terms and Conditions and that I am bound to the latest version of the Terms and Conditions on the website www.oasiscrest.com.

TAX DECLARATIONS

1. EXEMPT FROM TAX

DIVIDENDS TAX

Notes on completion of this section:

- This section is to be completed by the beneficial owner (of dividends, including dividends in specie) in order for the exemptions from dividends tax referred to in section 64F read with sections 64FA(2), 64G(2) or 64H(2)(a) of the Income Tax Act, 1962 (Act No 58 of 1962) (the Act) to apply.
- In order to qualify for an exemption this declaration and written undertaking should be submitted to the withholding agent (declaring company or regulated intermediary) within the period required by the latter (provided it is before payment of an affected dividend) - failure to do so will result in the full 15% dividends tax being withheld/payable.
- Non South African residents seeking to qualify for a reduced rate should not complete this form. Please use Form DTD (RR).

I declare that dividends paid to the me is exempt, or would have been exempt had it not been a distribution of an asset in specie, from the dividends tax in terms of the paragraph of section 64F of the Act indicated above. Y N/A

2. REDUCED TAX

DIVIDENDS TAX

Notes on completion of this section:

- This section is to be completed by the beneficial owner (of dividends, including dividends in specie) in order for the reduced rate of dividends tax, referred to in sections 64FA, 64G or 64H of the Income Tax Act, 1962 (Act No 58 of 1962) (the Act) as well as the provisions of the Agreement for the Avoidance of Double Taxation and Prevention of Fiscal Evasion (DTA) between the Republic of South Africa and the country of residence of the beneficial owner, to apply.
- In order to qualify for the reduced rate referred to above this declaration and written undertaking should be submitted to the withholding agent (declaring company or regulated intermediary) within the period required by the latter (provided it is before payment of the dividend) – failure to do so will result in the full 15% dividends tax being withheld/payable.
- Where the beneficial owner is a foreign resident but does not qualify for a reduced rate this form should NOT be completed.

I declare that all the relevant requirements in terms of Article _____ of the Agreement for the Avoidance of Double Taxation and Prevention of Fiscal Evasion (DTA) in force on the relevant date between the Republic of South Africa and the country of residence of the beneficial owner specified above, as well as sections 64FA, 64G or 64H of the Act (whichever is applicable), have been met and that dividends paid on the shares specified above are therefore subject to a reduced rate of _____ %. Y N/A

3. FATCA

We are obliged under the US Foreign Account Tax Compliance Act (FATCA) to collect certain information about each investor's tax arrangements. Please complete the sections below as directed. If any of the information below about your tax residence or FATCA classification changes in the future, please ensure you advise us of these changes promptly. If you have any questions about how to complete this form, please contact your tax advisor. Please note that where there are joint account holders each investor is required to complete a separate Self-Certification form.

Declaration of U.S. Citizenship or U.S. Residence for Tax purposes:

Please tick either (a) or (b) and complete as appropriate.

(a) I confirm that I am a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal taxpayer identifying number (U.S. TIN) is as follows: _____

OR

(b) I confirm that I am **not** a U.S. citizen or resident in the U.S. for tax purposes.

