



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:

**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:

**DEBIT ORDER AMOUNT**

Amend  Cancel

The initial debit order amount is R3000. This application form must be received 2 weeks prior to the first working day of the month on which the debit order will commence.

Total Debit Order Amount: R  Fund  Amount

Debit order date: 1st  7th  15th  25th  Month to commence:

I hereby authorise the Management Company to deduct the amounts specified above from the bank account as per the Bank Details provided and any further amounts as may be agreed by me in this application form. I acknowledge and understand that the Management Company requires at least 30 days written notice of the termination of a debit order instruction. Provided that the Management Company acts within the scope of its authority to any applicable debit order instruction, I hereby hold harmless and indemnify the Management Company against any/all charges/expenses actually incurred by the Management Company relating to any payment transaction which is returned by my bank, and not given effect to. The Management Company will add any amount for which I am liable, under this indemnity, to any amount due to the Management Company or may cause the Management Company to deduct and pay over such amount to the Management Company from any payment due to me. My liability under this indemnity shall be limited to the amount in respect of any payment value and/or charges/expenses incurred by a transaction returned by my bank and not given effect to.

**Name of Bank Account Holder**

**Signature of Bank Account Holder**

**BANK DETAILS ON DEBIT ORDER**

Same as above  Y  N

Name of bank:

Branch name:  Account number:

Branch code:  Name of account holder:

**PERSON ASSISTING SIGNATORY TO OPERATE THE ACCOUNT**

(If applicable)

Legal Capacity:

Id. No/ Passport No:  Date of Birth:

Title:  First Name(s):

Surname:

Residential Address:

Postal code:

Telephone Number:   Mobile/Cell phone:

Fax :   Email:

Either party can sign instructions:  ALL parties must sign ALL instructions:  Any two to sign:

**FINANCIAL ADVISOR CHANGE 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 confirms 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

Date:

**INVESTOR DECLARATIONS** (Investor to specify the agreed 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 that I have agreed that the following fee is payable.

Fee Type	Financial Advisor	Agreed Fee	
Initial	Maximum 2% 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	<input type="text"/>
		Debit Order	<input type="text"/>
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%.		<input type="text"/>

Initial

For your own benefit and protection you should read our Terms & Conditions carefully before committing to an investment. If you do not understand any point please ask us for further information. When you use our services we will take this as acceptance and agreement of our terms, and you will be bound by them. You hereby apply to subscribe for a Tax Free Investment Account for the tax year 2014/2015 (the first tax year to which this declaration relates) and each subsequent tax year in which you choose to make a subscription. You confirm that you have read, agreed to and retained the Terms & Conditions. Where you are investing in a fund you are doing so on the basis of the information contained in the Terms & Conditions. You declare that all subscriptions made, or to be made, belong to you. You have not subscribed, and will not subscribe more than the overall subscription limit in total to a Tax Free Investment in the same tax year. You authorise the Oasis Crescent Wealth (Pty) Ltd. ("the Administrator"): (a) To hold your subscriptions, investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash. (b) To make on your behalf any claims to relief from tax in respect of Tax Free Investments.

For your own benefit and protection you should read our Terms & Conditions carefully before committing to an investment. If you do not understand any point please ask us for further information. When you use our services we will take this as acceptance and agreement of our terms, and you will be bound by them. You hereby apply to subscribe for a Tax Free Investment Account for the tax year 2014/2015 (the first tax year to which this declaration relates) and each subsequent tax year in which you choose to make a subscription. You confirm that you have read, agreed to and retained the Terms & Conditions. Where you are investing in a fund you are doing so on the basis of the information contained in the Terms & Conditions. You declare that all subscriptions made, or to be made, belong to you. You have not subscribed, and will not subscribe more than the overall subscription limit in total to a Tax Free Investment in the same tax year. You authorise the Oasis Crescent Wealth (Pty) Ltd. ("the Administrator"): (a) To hold your subscriptions, investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash. (b) To make on your behalf any claims to relief from tax in respect of Tax Free Investments. The declaration and the information you give is correct to the best of your knowledge and belief and shall be the basis of the contract between you and the Administrator. You will notify the Administrator without delay of changes to these particulars. You have not received, and will not receive, advice from the Administrator. You confirm that the Financial Advisor has been appointed by you. You warrant that the information contained herein is true, correct and complete. You understand that it is your obligation to familiarise yourself with, and accept the risks associated with this investment. You confirm that the information about the product, investment objective and risk factors have been provided and disclosed to you by my Financial Advisor and that any other additional information that you have required, has been provided. I confirm that the Administrator reserves the right to accept an alternative value as my investment amount within the annual limitations set by the Revenue Authorities. You warrant that in respect of this investment you have not contravened any anti-money laundering legislation and regulations applicable to you. You permit the administrator to pass on your information to a third party, for marketing and market research purposes.

You hereby waive any claim, of whatsoever nature, you 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 company's employees, agents or representatives. You confirm that you have received the Terms and Conditions and that you are bound to the latest version of the Terms and Conditions on the website [www.oasiscrescent.com](http://www.oasiscrescent.com).

"Protection of Personal Information Act, 2013 ("POPI") – I confirm that I am aware that the Management Company and /or it's associated /partner companies are 'responsible parties' as defined by the 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.oasiscrescent.com](http://www.oasiscrescent.com))"

FICA documents for all persons/signatories in this application form.

- Clear copy of bar coded identity document certified by a Commissioner of Oaths
- Proof of residential address (utility bill, bank statement) not more than 3 months old
- Copy of bank statement/cancelled cheques (for proof of bank account)
- Proof of tax registration (front page of tax return or correspondence with SARS)

**Check List**

Fully completed application form

Y	N
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FICA of principle investor

Y	N
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FICA of Joint investor

Y	N
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FICA of Person assisting

Y	N
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Proof of deposit of any lump sum investments

Y	N
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Power of attorney - if applicable

Y	N
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I hereby indemnify the Administrator for acting on instructions provided by phone, fax or email.

<b>Signature of Investor</b>											
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D	D	M	M	Y	Y	Y	Y
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<b>Signature Jointholder</b>											
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D	D	M	M	Y	Y	Y	Y
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<b>Signature of Person Assisting</b>											
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D	D	M	M	Y	Y	Y	Y
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**FOR OFFICIAL USE**

<b>Capturer Name</b>
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<b>Signature</b>
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D	D	M	M	Y	Y	Y	Y
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<b>Authoriser Name</b>
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<b>Signature</b>
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D	D	M	M	Y	Y	Y	Y
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