

# The Financial Intelligence Centre Act (FICA): Client Due Diligence (CDD) Trusts

|                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Client Identity/Registration Number |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

A trust established for the following reasons, does not have to fill in the checklist:

- by the trustees of a retirement fund for benefits payable to beneficiaries of the retirement fund;
- as per a court order;
- for persons under curatorship; or
- as per a testamentary writing.

To comply with money laundering regulations, we require certain identification details and documents to be in place in order for an application to be processed. Incomplete details and documentation will delay the processing of an application and a business relationship cannot be formed until all documentation including any additional information (if requested), has been provided.

**This form is to be completed when an application/alteration form does not provide for the required details.**

Please submit the supporting documentation with this form.

**Important:**

**For the purpose of this form:**

- The term Policyholder also refers to Investment Owner and Contract Owner.
- The term Contribution Payer also refers to Premium Payer and Fund Provider.

## 1: Information of policyholder/outright cessionary/contribution payer/person acting on behalf of \_\_\_\_\_

Are you already a client?  Yes  No  Momentum  Metropolitan

### 1.1 Basic information

Name

Registration number

Province and city where the Trust was registered

### 1.2 Additional information

Name of founder of Trust

Identity/Passport number

Capacity

#### 1.2.1 Details of all active Trustees

| 1. Full names            |     |                          |    | 2. Full names            |      |     |                          |    |                          |
|--------------------------|-----|--------------------------|----|--------------------------|------|-----|--------------------------|----|--------------------------|
| Identity/Passport number |     |                          |    | Identity/Passport number |      |     |                          |    |                          |
| Physical address         |     |                          |    | Physical address         |      |     |                          |    |                          |
| Capacity/Designation     |     |                          |    | Capacity/Designation     |      |     |                          |    |                          |
| PEP                      | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | PEP  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| DPIP                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | DPIP | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| FPPO                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | FPPO | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

|                          |     |                          |    |                          |      |     |                          |    |                          |
|--------------------------|-----|--------------------------|----|--------------------------|------|-----|--------------------------|----|--------------------------|
| 3. Full names            |     |                          |    | 4. Full names            |      |     |                          |    |                          |
| Identity/Passport number |     |                          |    | Identity/Passport number |      |     |                          |    |                          |
| Physical address         |     |                          |    | Physical address         |      |     |                          |    |                          |
| Capacity/Designation     |     |                          |    | Capacity/Designation     |      |     |                          |    |                          |
| PEP                      | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | PEP  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| DPIP                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | DPIP | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| FPPO                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | FPPO | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Full names            |     |                          |    | 6. Full names            |      |     |                          |    |                          |
| Identity/Passport number |     |                          |    | Identity/Passport number |      |     |                          |    |                          |
| Physical address         |     |                          |    | Physical address         |      |     |                          |    |                          |
| Capacity/Designation     |     |                          |    | Capacity/Designation     |      |     |                          |    |                          |
| PEP                      | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | PEP  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| DPIP                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | DPIP | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| FPPO                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | FPPO | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

1.2.2 Details of Trust beneficiary

|  |     |                          |    |  |      |     |                          |    |                          |
|--|-----|--------------------------|----|--|------|-----|--------------------------|----|--------------------------|
| 1. Full names                          |     |                          |    | 2. Full names                          |      |     |                          |    |                          |
| Identity/Passport/ Registration number |     |                          |    | Identity/Passport/ Registration number |      |     |                          |    |                          |
| Physical address                       |     |                          |    | Physical address                       |      |     |                          |    |                          |
| Capacity/Designation                   |     |                          |    | Capacity/Designation                   |      |     |                          |    |                          |
| PEP                                    | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | PEP  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| DPIP                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | DPIP | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| FPPO                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | FPPO | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Full names                          |     |                          |    | 4. Full names                          |      |     |                          |    |                          |
| Identity/Passport/ Registration number |     |                          |    | Identity/Passport/ Registration number |      |     |                          |    |                          |
| Physical address                       |     |                          |    | Physical address                       |      |     |                          |    |                          |
| Capacity/Designation                   |     |                          |    | Capacity/Designation                   |      |     |                          |    |                          |
| PEP                                    | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | PEP  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| DPIP                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | DPIP | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| FPPO                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | FPPO | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Full names                          |     |                          |    | 6. Full names                          |      |     |                          |    |                          |
| Identity/Passport/ Registration number |     |                          |    | Identity/Passport/ Registration number |      |     |                          |    |                          |
| Physical address                       |     |                          |    | Physical address                       |      |     |                          |    |                          |
| Capacity/Designation                   |     |                          |    | Capacity/Designation                   |      |     |                          |    |                          |
| PEP                                    | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | PEP  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| DPIP                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | DPIP | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| FPPO                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/>               | FPPO | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

1.3 Anti-money laundering provisions

1.3.1 Source of income/wealth\* (Policyholder)

Nature of business

Source of income/wealth is defined as funds received on a regular basis for work/services rendered or investment income.

1.3.2 Source of funds for investment/transaction\* (Contribution payer)

|                          |                    |  |                      |
|--------------------------|--------------------|--|----------------------|
| <input type="checkbox"/> | Business profits   | Name of business                                 | <input type="text"/> |
| <input type="checkbox"/> | Sale of property   | Address of sold property                         | <input type="text"/> |
| <input type="checkbox"/> | Sale of assets     | Description of what was sold                     | <input type="text"/> |
| <input type="checkbox"/> | Sale of business   | Registration number                              | <input type="text"/> |
| <input type="checkbox"/> | Investment/Savings | Source of capital/savings                        | <input type="text"/> |
|                          |                    | Name of investment company                       | <input type="text"/> |
|                          |                    | Account/contract number where the funds are held | <input type="text"/> |
| <input type="checkbox"/> | Donation           | Source of donation                               | <input type="text"/> |
| <input type="checkbox"/> | Other              | Specify  | <input type="text"/> |

\* The source of funds funding the transaction or new business investment will not always correspond with the source of income/wealth, e.g. an employed person may sell his/her property and invest the capital gained.

2: Verification documents

2.1 Verification of name, number and address of Master's Office where the trust is registered (or such other official document issued if a foreign trust)

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | 2.1.1 A Letter of Authority from the Master's Office confirming registration of the trust; |
| <input type="checkbox"/> | 2.1.2 Trust deed or founding document.   |

2.2.1 Verification of founder

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | 2.2.1.1 Please fill in the checklist applicable to natural persons - FICA 001 (Section 1.1 & 1.2 & Section 2.1 & 2.2). for the founder; or |
| <input type="checkbox"/> | 2.2.1.2 If the founder has died or has been deregistered, attach death certificate or certificate of deregistration.                       |

2.2.2 Verification of each active trustee

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | 2.2.2.1 Please fill in the checklist applicable to natural persons - FICA 001 (Section 1.1 & 1.2 & Section 2.1 & 2.2) for each trustee; and |
| <input type="checkbox"/> | 2.2.2.2 An authorisation that the Master of the High Court (if trust was created in the Republic) gave to each trustee; or                  |
| <input type="checkbox"/> | 2.2.2.3 The official Trust Deed document reflecting authority granted to trustees (if the case of foreign trusts).                          |

2.2.3 Verification of each person authorised to act/transact with Momentum, Metropolitan on behalf of the trust

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | 2.2.3.1 Please complete the checklist applicable to natural persons - FICA 001 (Section 1.1 & 1.2 & Section 2.1 & 2.2) for each authorised representative; and |
| <input type="checkbox"/> | 2.2.3.2 A written authority as determined in the trust deed signed by all the trustees reflecting the names of the representatives.                            |

**2.2.4 Verification of each trust beneficiary**

Please complete the applicable FICA checklist for each trust beneficiary:

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | 2.2.4.1 Natural persons - FICA 001 (Section 1.1 & 1.2 & Section 2.1).     |
| <input type="checkbox"/> | 2.2.4.2 Private companies - FICA 002 (Section 1.1 & 1.2 & Section 2.1).   |
| <input type="checkbox"/> | 2.2.4.3 Closed Corporations - FICA 003 (Section 1.1 & 1.2 & Section 2.1). |
| <input type="checkbox"/> | 2.2.4.4 Other legal persons - FICA 004 (Section 1.1 & 1.2 & Section 2.1). |
| <input type="checkbox"/> | 2.2.4.5 Trusts - FICA 005 (Section 1.1 & 1.2 & Section 2.1 & 2.2).        |
| <input type="checkbox"/> | 2.2.4.6 Partnerships - FICA 006 (Section 1.1 & 1.2 & Section 2.1).        |
| <input type="checkbox"/> | 2.2.4.7 Foreign companies - FICA 007 (Section 1.1 & 1.2 & Section 2.1).   |
| <input type="checkbox"/> | 2.2.4.8 Listed companies - FICA 010.                                      |

**3: Verification of bank details**

Receipt of contributions:

- If the account is not in the name of the policyholder, please complete and provide the documentation in accordance with the appropriate FICA checklists on the account holder (e.g. CC, Trust, Other legal entity, etc.).
- No payment received from a third party will be invested until the required documentation is received and reviewed.

**3.1 Benefits payable where the trust is the contract owner**

**3.1.1 Provide your bank account details if you have selected to have your contributions (single or recurring) collected from your bank account**

|                        |                                     |                      |                      |                      |                      |                              |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |
|------------------------|-------------------------------------|----------------------|----------------------|----------------------|----------------------|------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Name of account holder | <input type="text"/>                |                      |                      |                      |                      |                              |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |
| Name of bank           | <input type="text"/>                |                      |                      |                      |                      |                              |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |
| Branch code            | <input type="text"/>                | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>         | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Branch name          | <input type="text"/> |                      |                      |                      |
| Account number         | <input type="text"/>                | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/>         | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Account type           | <input type="text"/> Current/Cheque |                      |                      |                      |                      | <input type="text"/> Savings |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |

**3.1.2 If funds are paid directly into a Momentum or Metropolitan bank account**

A proof of deposit is required and must indicate:

|   |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                  |                      |  |  |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|------------------|----------------------|--|--|
| From which institution was the deposit made             | <input type="text"/> |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                  |                      |  |  |
| Date of deposit   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Amount deposited | <input type="text"/> |  |  |
| Source (account number) from where the funds originated | <input type="text"/> |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                  |                      |  |  |
| Name of account holder                                  | <input type="text"/> |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                  |                      |  |  |
| The contract number for which the funds are intended    | <input type="text"/> |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                  |                      |  |  |

\*\* We will not make payments to credit cards, market-linked accounts or third party accounts. Payments can only be made to the Policyholder's own bank account. No third party payments are permitted.

Please note:

- Payment will only be made to the trust, where the trust is the owner of the contract.
- No third party payments will be allowed where the trust is the policy holder.

**4: Testamentary trusts**

**4.1 To verify the identity of the trust**

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | 4.1.1 Copy of the will or the testamentary trust deed             |
| <input type="checkbox"/> | 4.1.2 Letter of authority issued by the Master of the High Court. |

Please note that if one of the two documents listed above does not exist, then the trust has not been registered with the Master and so does not exist.

## 4.2 Proof of authority to act on behalf of the trust

4.2.1 Attach a copy of the appointment of the authorised persons who may act on behalf of the trust when dealing with Momentum, Metropolitan. In most instances it will be the executor.

## 4.3 Proof of identity for each authorised representative

4.3.1 Fill in FICA 001 (Section 1.1 & 1.2 & Section 2.1) for each authorised representative and include the documentation as requested.

## 5: Protection of Personal Information

Momentum, Metropolitan are required to collect relevant information from each client for anti-money laundering and prevention of terrorist financing, for tax purposes according to the Intergovernmental Agreement ("the IGA"), and for reporting on these clients to the South African authorities where necessary.

We also collect personal information about you to offer you the best service. Your information is used for administrative, operational, audit, marketing, research, legal, statutory and record keeping purposes. We will take all reasonable steps necessary to secure the integrity of any personal information which we hold about you and to safeguard it against unauthorised access. We will not share this information outside of Momentum, Metropolitan, its associated groups or agents, without your explicit consent.

If you do not consent to us using your personal information, there may be delays for you or some instructions might not be carried out. You can have access to your information at any time and ask us to correct any information we have in our possession. Please feel free to write to us to obtain a copy of this information of which copies will be kept for a period of five years or more, as required by law.

## 6: Signature of client specified in Section 1

Name and surname of authorised signatory

|  |   |
|--|---|
| <b>Signature of authorised signatory</b> | <input type="text"/>  |
|  | <b>Date</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |