Absa Investment Management Services

The One Investment Application – Individual

New business form

Confidential

Absa Investment Management Services (Pty) Ltd ("**AIMS**") is an authorised Financial Services Provider ("**FSP**"), authorised in terms of the Financial Advisory and Intermediary Services ("**FAIS**") Act and is further authorised as an administrative FSP. All these details are available on the Financial Sector Conduct Authority ("**FSCA**") website if required.

All relevant sections must be completed in full. Please indicate all options selected by means of a tick (✓). The investor must initial next to any amendments made on the form.

Please send a fully completed instruction to aimscc@absa.co.za

Existing Absa Bank client ☐ Yes ☐ No

As a minimum, we will require the following documents to accompany this form, depending on your profile:

- ☐ Certified copy of identity document ("**ID**") or passport (certified copy if the investor does not have an adviser i.e. direct investor).
- ☐ Proof of your current residential address, not older than 3 (three) months e.g. (copy of certified municipal lights, water and rates account; telephone account; store account statement).
- ☐ Proof of deposit.
- ☐ Completed transfer of unit trust funds/securities form (if applicable).
- ☐ South African Revenue Service ("**SARS**").
- ☐ Dividend Tax Declaration (if applicable).
- ☐ If a Wrap Personal Share Portfolio ("**PSP**") is selected, a discretionary mandate must be signed and submitted with the application form.
- ☐ Related party's/parties' required documents.
- ☐ Third party's/parties' bank accountholder required documents.

Office use

- ☐ National Distribution Administration Capability ("**NASDAC**") pass (Absa Adviser only).
- ☐ Tier two pass (Absa Adviser only).
- ☐ Group Introductory Certificate ("**GIC**") (Wealth Adviser only).

Section 1 – Product and minimum lump sum amount

Discretionary products:

☐ Investment Account ***R50 000	☐ Protected Growth R150 000	☐ Protected Income R150 000	☐ Protected Growth and Income R150 000
☐ Tax-free Savings R5 000	☐ Islamic Investment Plan R50 000	☐ Linked Endowment **R50 000	☐ Offshore Investment Account R100 000
☐ ****Structured Product	☐ Cash Invest Tracker ("**CIT**") ***R250 000		

Contractual products:

☐ *Living Annuity R75 000	☐ Provident Preservation Fund *R25 000	☐ Pension Preservation Fund *R25 000	☐ Retirement Annuity Fund *R25 000

Instruction type: ☐ New business ☐ Unit Transfer ☐ Section 50 (transfers applicable to Living Annuities) ☐ Section 14 (transfers applicable to Retirement Annuity Fund, Provident Preservation Fund and Pension Preservation Fund) ☐ Tax-free Savings Transfer

***Please complete the contractual withdrawal form in conjunction with the One Application.**

****The Investment Account and Linked Endowment investment minimum is R250 000 when investing in a PSP.**

*****The Investment Account minimum is R250 000 when investing in the Cash Invest Tracker ("CIT").**

******Refer to the respective brochure and investment schedule for the minimum investment amount.**

All products offering the PSPs have minimums that apply depending on the chosen PSP (refer to PSP Fund List and Fees).

***Note:** It is mandatory to provide a tax number.

Absa Investment Management Services (Pty) Ltd Reg No 1980/002425/07 an Authorised FSP – FSP No 524
PO Box 974, Johannesburg, 2000
Website: absainvestments.co.za

Absa 6916 EX (20/10/2022)

Section 2 – The Investor

Individual investor's details

Title ______ Initials ______ Surname ______

First name(s) ______ Date of birth ______ (dd/mm/ccyy)

☐ Individual ☐ Absa employee ☐ AIMS employee

Absa employee BRID number ______

ID/Passport number ______ If passport, state reason: ☐ Lost ID ☐ Stolen ID ☐ Non-SA national

Country of origin ______ Country of residence ______

Country of nationality ______

Language: ☐ English ☐ Afrikaans Gender: ☐ Male ☐ Female

Marital status: ☐ Married ☐ Single ☐ Divorced ☐ Other If "**Other**", please specify ______

Source of Funds: ☐ Donation ☐ Allowance ☐ Inheritance ☐ Pension ☐ Salary ☐ Savings/Investments ☐ Other If "**Other**", please specify ______

Are you married in community of property? Yes No

If "**Yes**", has your spouse provided you with consent, including written consent, where required, to make this investment and/or appoint a beneficiary other than your spouse? Yes No

Investor's address details

Residential address ______

Suburb ______

Town/City ______ Postal code ______

Country ______

☐ Postal address same as residential

If postal address is not the same as residential, postal address:

______

______ Postal code ______

Investor's contact details

Telephone (H) ______ (W) ______

Cellphone ______

Email ______

Notification preference: ☐ Email ☐ SMS Communication preference: ☐ Email ☐ Post

Tax details

Note: In the case of a foreign entity, kindly fill in the Tax Self-certification and Declaration Form (Absa 6279 EX).

*Income tax number ______

Reason for not providing tax number [please tick (✓) the applicable box]:

☐ Minor

☐ Earnings below taxable threshold

☐ Withholding tax and foreign interest ☐ Dividend tax

☐ Tax resident of South Africa only ☐ Foreign tax resident

Employment details

Occupational status: ☐ Full-time ☐ Part-time/Temporary ☐ Pensioner/Retired ☐ Unemployed ☐ Student/Scholar ☐ Self-employed ☐ Other If "**Other**", please specify ______

Monthly gross income ______

Occupation ______

Investor's bank details

Note: Bank details captured in this section should exclusively be those of the investor and should not belong to a third party as payments into third-party bank accounts are not permitted.

Name and surname of accountholder

Name of bank | Account number | Branch code

Account type: ☐ Current ☐ Savings ☐ Transmission

Lump Sum Investment Portfolio

If you do not indicate a fund class, we will invest the monies into the Premium Fund Range class.

If you are investing in the Structured Product, no other funds may be selected.

Please ensure that all percentage allocations add up to 100% in total.

How much would you like to invest?

- You must invest a lump sum of at least R20 000 and/or commit to a debit order of at least R500 per month.

Investment type: ☐ Lump sum ☐ Recurring ☐ Combination

Lump sum amount **R**

and/or monthly debit order amount **R**

If you do not indicate a fund class, we will invest the monies into the Premium Fund Range class.

How would you like to invest your money?

You must indicate your lump sum and/or monthly debit order into one or more fund(s). Indicate the rand amount/percentage per unit trust in the table below:

Fund name	Fund code	Lump sum allocation		Monthly debit order allocation	
		R	% or	**R**	%
			% or	**R**	%
			% or	**R**	%
			% or	**R**	%
			% or	**R**	%
			% or	**R**	%
			% or	**R**	%
			% or	**R**	%
			% or	**R**	%

☐ Use the same details for debit order, as for lump sum.

Please ensure that the amounts or percentages allocated across unit trusts add up to your total lump sum or monthly debit order amounts or to 100%.

Lump sum payment method

☐ Electronic transfer ☐ Direct debit (not applicable to Guaranteed and Structured Products)

Note: If direct debit is selected, the following details should be provided:

Lump sum amount via direct debit **R**

The full lump sum amount collected via direct debit will be limited to a maximum of R1 000 000 per day for each consecutive day, until the full amount has been collected. If you invested via a debit order or direct debit, we will only process an instruction (repurchase, transfer-out, outright cession, etc.) from you 40 (forty) days following the date of the investment, as an investor has 40 (forty) days within which to dispute a collection with their bank.

Direct debit bank details

Note: If the direct debit is from a third party account, please include Financial Intelligence Centre Act ("**FICA**") supporting documents:

- A natural person should provide the following: ID copy with three specimen signatures, proof of address not older than 3 (three) months and contact details.
- If it is a legal entity, please provide the following: Companies and Intellectual Property Commission ("**CIPC**") documents not older than 6 (six) months, company resolution letter confirming the authorised individual and FICA documents for the authorised individual.

Direct debit date (dd/mm/ccyy)

Please indicate with a tick (✓) the applicable transfer option:

☐ Vested interest Value

Vested Interest: Investors are still able to withdraw up to 100% of their investment value deemed "**vested**". Vested interest refers to investment values before 1 March 2021, including all growth occurring from this value thereafter.

and

☐ Non-vested interest Value

Non-vested Interest: The non-vested interest portion of an Investor's investment is now subject to the one third/two thirds rule at retirement. Non-vested interest includes any additional contributions made after 1 March 2021.

*Only application to Section 14 Transfers and New Business Transfers as a result of resignation, dismissal, retrenchment and divorce.

Please indicate with a tick (✓) the applicable transfer option:

Transfer-in

☐ Section 14 transfer instruction

Investment number

Product name

Portfolio number

Transfer to AIMS from (company's name)

Fund name

Fund registration number

Fund rule number

Please indicate with a tick (✓) the applicable:

Transfer type:

☐ Cash transfer Estimated transfer value

or

☐ Unit trust transfer Estimated transfer value

I hereby instruct the Management Company to transfer the units as indicated below.

Fund code	Fund name	Percentage	Units	Account number

Please note:

1 This transfer will only be successful subject to the approval of the Registrar of Pension Funds, where applicable. All documents must be submitted to the Registrar of Pension Funds within 180 (one hundred and eighty) days of the effective date of transfer. Once the Registrar of Pension Funds approval is granted the assets must be transferred within 60 (sixty) days.
2 If the client requests to cancel the transfer instruction, after submitting to the Registrar of Pension Funds, a fee will be levied for this cancellation.
3 On receipt of all the documents, AIMS will request the Section 14 documents from the transferring fund.
4 If both Funds are valuation exempt, no Registrar of Pension Funds approval is required.
5 Where a PSP is selected, the portfolio will be redeemed within our timing standards. The proceeds of the redemption can take up to 60 (sixty) business days to be paid to AIMS, provided that the shares or other investment in the PSP is liquid.

Please indicate with a tick (✓) the applicable transfer option:

Transfer-in

☐ Section 50 transfer instruction

Investment number

Product name

Portfolio number

Transfer to AIMS Living Annuity from (Company name)

Fund name

Fund registration number

Please indicate with a tick (✓) the applicable:

Transfer type:

☐ Cash transfer Estimated transfer value

or

☐ Unit trust transfer Estimated transfer value

I hereby instruct the Management Company to transfer the units as indicated below.

Fund code	Fund name	Percentage	Units	Account number

Please note:

1 On receipt of all the documents, AIMS will request the annexures from the Transferor Fund.
2 Subject to the assets not being transferred in time for the annuity run, the transferor will be responsible for the client's annuity payment.
3 Income can only be changed on the anniversary of the policy and not on transfer.
4 No initial fee may be charged by the Financial Adviser on this transfer.
5 No transfers of Exchange Traded Funds ("**ETFs**") into the Living Annuity will be allowed due to regulatory requirements governing annuity payments.

Phase-in investment

Please note that the phase-in does not apply to a PSP, CIT, Structured Products and the Protected Outcome Product range and Islamic Investment Plan. Not applicable to Switch instructions. Only applicable to New Business applications.

Phase-in? Yes No

Commencement of phase-in: ☐ Immediate ☐ Following month

	Fund name	Total amount to be phased in per month
From	**Money Market Fund**	**R**

To

Fund name	Fund code	Total amount	Percentage
		R	%
		R	%
		R	%
		R	%
		R	%
		R	%
		R	%

Debit order

Please note that debit orders do not apply to a PSP portfolio, CIT, Living Annuity, Pension Preservation, Structured and Guaranteed products.

Recurring amount **R** Please refer to product brochure for minimum amounts

Debit order frequency: ☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Annually Monthly debit dates: 3, 10, 17, 25

First debit order (dd/mm/ccyy)

Annual increase in recurring investment % Next increase date (dd/mm/ccyy)

Third-party debit order bank details

Note: Only fill in the below if the bank accountholder details differ from those of the investor's banking details. Please include Financial Intelligence Centre Act ("**FICA**") supporting documents:

- certified FICA documents not older than 3 (three) months;
- if the third party is a natural person provide the following: ID copy with three specimen signatures and contact details; and
- if the third party is a legal entity please provide the following: Companies and Intellectual Property Commission ("**CIPC**") documents, company resolution letter and FICA for authorised individual.

Name and surname of accountholder

Name of bank Account number

Branch code Account type: ☐ Current ☐ Savings ☐ Transmission

Contact telephone number

Debit order date (dd/mm/ccyy)

Residential address

Postal code

Identity number

Third-party debit order authority

The third-party hereby agrees to the following actions/statements:

- I/We instruct and authorise AIMS, its successors or its assignees to draw against my/our account with the bank noted above (or any bank or branch to which I/we may transfer my account).
- I/We understand that all such withdrawals from my/our bank account will be treated as though they had been authorised by me/us personally.
- I/We agree to pay any bank charges and costs relating to the debit order authority, including debit order rejection fees.
- I/We acknowledge that I/we may cancel this authority by giving AIMS not less than 10 (ten) calendar days written notice prior to the debit order date.
- I/We agree that receipt of this instruction by AIMS will be regarded as receipt thereof by my/our bank.
- I/We understand that for AIMS to activate the debit order, they must receive the application form at least 14 (fourteen) days prior to the first debit order date.
- I/We understand that debit orders will be cancelled in the event that the debit order is rejected. To reactivate the debit order, a new instruction is required.
- I/We I understand that as a third party I/we is/aren't authorised to act on behalf of the investor unless a Power of Attorney Form has been submitted.

Signature of bank accountholder   Date (dd/mm/ccyy) ☐☐☐☐☐☐☐☐

Distributions

☐ Reinvest (same fund) - default   ☐ Payout   ☐ Reinvest (cash account)

Reinvest (cash account) allocation

Please indicate in the table below to which fund(s) the money in the cash account should be allocated:

Fund name	Fund code	Percentage
		%
		%
		%
		%
		%
		%
		%

Fee deduction profile – please indicate with a tick (✓) how fees should be deducted from your portfolio.

☐ AIMS distribution fund   ☐ *Pro rata* across investment

Please note: Distributions earned on Exchanged-traded Funds ("**ETFs**") will be reinvested in the Client Cash Movement Fund.

Regular Income Portfolio (if applicable)

- This only applies to the Investment Account, Living Annuity, Protected Income and Islamic Investment Plan.
- Only monthly or quarterly income is allowed on PSP fund(s) selection(s).
- Only monthly income is allowed on the Protected Income.
- Only monthly or quarterly income is allowed on the Absa Protected Accumulated fund(s) selection(s).
- Investment Account: Where an income is deducted from an Exchange-traded Fund ("**ETF**"), the amount paid will be greater than specified due to whole units being repurchased. The payment of the income will take place 3 (three) working days after the 25th of the month.

Note: If you select an ETF in a Living Annuity product, we will direct income and fee payments from the Money Market Fund, which will be rebalanced accordingly.

☐ *Pro rata* across fund selection (default option)   ☐ Specific funds

Income amount per frequency ______ or income percentage ______

Fund name	Fund code	Total amount		
		R	or	%
		R	or	%
		R	or	%
		R	or	%
		R	or	%

First income payment (dd/mm/ccyy) **2 5** ☐☐☐☐☐☐

Income frequency: ☐ Monthly ☐ Quarterly ☐ Half-yearly ☐ Annually

Annual escalation rate ______ %   Annual escalation date (dd/mm/ccyy) **2 5** ☐☐☐☐☐☐

The annual escalation is only applicable on the Investment Account.

Section 3 – Related party's/parties' information

If applicable, please complete all related party information for power of attorney holders, donor and guardians.
"A" refers to the first listed related party, followed by "B" as the second etc.
In respect of "A" the following must be completed

First name and surname

Relationship

Identity/Registration number

Physical address

Postal code

Contact number

Related party type: Individual Other If "**Other**", please indicate

Country of origin

Country of residence

In respect of "B" the following must be completed

First name and surname

Relationship

Identity/Registration number

Physical address

Postal code

Contact number

Related party type: Individual Other If "**Other**", please indicate

Country of origin

Country of residence

In respect of "C" the following must be completed

First name and surname

Relationship

Identity/Registration number

Physical address

Postal code

Contact number

Related party type: Individual Other If "**Other**", please indicate

Country of origin

Country of residence

Section 4 – Investment details

Important note:

- If you select a Wrap, please make sure you indicate the wrap code of the investment selection.
- When investing in a PSP, a minimum amount of your investment must be allocated to a Money Market Fund for the payment of income and fees.
- PSP investment minimums are determined by the PSP provider, please see the PSP brochure available on absainvestments.co.za
- Where a PSP is selected, the portfolio will be redeemed within our timing standards. The proceeds of the redemption can take up to 60 (sixty) business days to be paid to AIMS, provided that the shares or other investments in the PSP are liquid.

Investment type: Lump sum Recurring Combination

Investment amount **R**

In the event of my death, should my investment (Retirement Annuity and Preservation Funds) be transferred into the Money Market Fund? Yes No

For the Retirement Annuity and the Preservation Funds, your investment will be switched into the Money Market Fund on notification of your death.

Section 5 – Life Assured and beneficiary details

Life Assured

This only applies to the Linked Endowment and the Protected Growth product options.

Are you a Life Assured? Yes No

Complete if Life Assured is other than the investor

Life Assured 1

Title Surname

First name(s) Initials

Relationship

Identity/Passport number Nationality

Date of birth (dd/mm/ccyy) Gender: Male Female

Life Assured 2

Title Surname

First name(s) Initials

Relationship

Identity/Passport number Nationality

Date of birth (dd/mm/ccyy) Gender: Male Female

Life Assured 3

Title Surname

First name(s) Initials

Relationship

Identity/Passport number Nationality

Date of birth (dd/mm/ccyy) Gender: Male Female

Beneficiary for ownership nomination

Note: If you have not nominated a Life Assured, the beneficiary for ownership nominated will by default be the second Life Assured. Only one beneficiary for ownership is permitted.

This only applies to the Linked Endowment and the Protected Outcome product options.

First name and surname	Relationship	Identity number

Country of origin

Country of residence

Beneficiary for proceeds nomination for Living Annuity, Retirement Annuity Fund, Preservation Fund, Pension Fund and Provident Fund, Linked Endowment and Protected Outcome

For the Protected Outcome – Income option, only one beneficiary may be nominated. The surviving spouse and/or estate can be appointed.

Select the relevant option by means of a tick (✓):

☐ Protected Outcome

☐ Estate ☐ Spouse

A – Full names and surname	Identity number	% share	Relationship

Country of origin

Country of residence

B – Full names and surname	Identity number	% share	Relationship

Country of origin

Country of residence

C – Full names and surname | **Identity number** | **% share** | **Relationship**

Country of origin

Country of residence

D – Full names and surname | **Identity number** | **% share** | **Relationship**

Country of origin

Country of residence

E – Full names and surname | **Identity number** | **% share** | **Relationship**

Country of origin

Country of residence

In the event of your death prior to your retirement, the trustees of the Retirement Annuity Fund are responsible for allocating your benefit in terms of Section 50C of the Pension Funds Act. Your beneficiary nomination(s) will be taken into account when the trustees allocate your benefit.

Section 6 - Financial Services Provider's fees and details

Note: All fee percentages (%) should be captured excluding VAT.

Protected Outcome – Growth ____ % Protected Outcome – Income ____ %

Lump sum initial advice fee ____ % *Annual advice/Section 14 RA fee ____ % Debit order initial advice fee ____ %

Name of representative

Representative code

Financial Services Provider/Brokerage name

PRI number (Absa use only)

FAIS License Category

***Please note that the fee is also applicable for section 14 transfers on retirement annuities.**

Financial Services Provider/Representative declaration

- I have read and understood the terms and conditions pertaining to the selected investment.
- I warrant that all statements given in the form are true and correct in every respect.
- I acknowledge and certify that I have personally explained to the investor all the features and terms of the product.
- I acknowledge that the investor will be screened and profiled by AIMS and/or a third party service provider appointed by us as per our terms and conditions.
- I acknowledge that I have personally explained all the fees, charges and commission applicable to this investment to the investor.
- I can confirm that I am appropriately licensed in terms of FAIS and the mandate provided to me by the FSP to advise the investor on this product.
- I warrant that any electronic signature provided by the investor complies with the FSCA Communication 12 of 2021 on the Use of Electronic Signatures and Pre-populated Documents as well as the Electronic Communications and Transactions Act, 2002.

The Financial Services Provider/Representative further declares and confirms in respect of FICA that:

- I have taken all reasonable steps to establish the identity of the investor before entering into a business relationship with the investor or concluding a single transaction with the investor.
- I have verified the information of the investor in accordance with the requirements set out in Section 21 of FICA.
- I have obtained copies of the investor's identity document and any other verification documents as required in terms of Section 22 of FICA and are keeping record of the required documents after having seen the original documents.

Signed at ______________________________ on ______________________________

____

Financial Services Provider/Representative's signature

Investor(s) declaration

You, or where applicable, your authorised signatory, hereby state that:

- I acknowledge that I am aware of and understand the fees, charges and commission applicable to this investment.
- I have read and understood the terms and conditions pertaining to the selected investment, including the legal terms.
- I warrant that all statements in the form are true and correct in every respect.
- I acknowledge that I will be screened and profiled by you and/or a third-party service provider appointed by you as per your terms and conditions.
- I confirm that this form has been signed by me personally including instances where I have used an electronic signature.
- By signing this form I hereby indemnify AIMS against any loss, damage or cost that may arise as a result of my failure to have signed this form on my own.
- I confirm that I have received my spouse's consent, including written consent, where required, in accordance with Section 15 of the Matrimonial Property Act, No 88 of 1984 or any other applicable laws, to transact on our collective assets and to nominate the beneficiaries as set out in this form.

Minor's declaration (applicable to minor applications and beneficiaries)

I warrant and represent that I acknowledge and understand that minors may lack the legal capacity required to enter into legally binding contracts by themselves and I confirm that I am acting on the minor's behalf in the capacity as:

☐ Parent ☐ Legal guardian ☐ Other (If "**Other**", please specify) ____________

I voluntarily provide consent for the processing of the minor's personal information for purposes of offering the product or services described herein.

Marketing consent

To enable Absa Group Limited ("**AGL**") to offer you a full range of services and products suited to your needs, we require your consent to use your personal information within AGL and to communicate to you on an ongoing basis. I agree to notify Absa Investment Management Services (Pty) Ltd ("**AIMS**"), an entity of AGL, immediately in the event that information on this application form changes.

Please tick (✓) the appropriate boxes:

☐ I hereby consent to the above.

☐ I do not want to receive information via electronic means about associated products and services provided by AGL, including promotions and special offers and will not hold AGL liable for any opportunities I may potentially miss as a result of my decision.

Please select your communication preference:

☐ SMS ☐ Post ☐ Telephone ☐ Email

The FSP/Representative is appointed by the investor with: ☐ *Discretionary mandate

*If applicable, the limits on the FSP/Representative's discretion are as set out in the approved mandate attached to this form and signed by the investor.

- If I am also responsible for payments to this investment, I agree that, for this investment, you can collect money from my account(s) and that I can sign for the bank account(s).
- I know that my financial adviser must be appropriately licensed with the "**FSCA**".

If any of your information changes, you must let us know.

Signed at ____________________ on ____________________

____________________ ____________________

Investor's signature [or duly authorised person(s) where applicable] Signature of legal guardian (if applicable)

Submit signed and completed instructions to aimscc@absa.co.za

Privacy Notice

Absa Investment Management Services (Pty) Ltd ("**AIMS**"), an entity of Absa Group Limited ("**AGL**"), in our capacity as a Category III Financial Services Provider and Section 13B administrator, together with the insurer on whose behalf we provide binder and outsourced functions, only collect, process and share your personal data so that we can provide you with the investment service or investment product that you are applying for. We will obtain your consent for any other processing that is not related to this purpose. To read our detailed Privacy Notice, please refer to the terms and conditions.

Section 7 – Information about AIMS

Authorised Financial Services Provider FSP 524.

Registration number: 1980/002425/07

Head office	Postal address	Website	Client Services	Email address
4th Floor Towers North 180 Commissioner Street 2001	PO Box 974 Johannesburg 2000	absainvestments.co.za	0860 000 005	New instructions: aimscc@absa.co.za Queries: aimsenquiries@absa.co.za

Absa Investment Management Services (Pty) Ltd ("**AIMS**") is an authorised Financial Services Provider ("**FSP**"), authorised in terms of the Financial Advisory and Intermediary Services ("**FAIS**") Act and is further authorised as an administrative and discretionary FSP. All these details are available on the Financial Sector Conduct Authority ("**FSCA**") website if required.

Complaints process

1 Please lodge a complaint in writing or telephonically to AIMS, addressed to our Client Services Department, using the contact details set out below.

2 The complaint must contain the client details, details of the complaint and any documentary proof, where applicable.

3 Upon receipt by AIMS of the abovementioned information, your complaint will be acknowledged by the AIMS employee that will assist in the resolution of your complaint.

4 Where possible, AIMS endeavours to resolve your complaint within 10 (ten) business days of receipt of your complaint, taking into account the nature of the complaint and the product type. You will be contacted if we discover during the course of the investigation that further information or documents are required. In this event, the conclusion of the matter may take a while longer. If you are not satisfied with the reply, you may refer the matter to the compliance officer of AIMS. In the event that we have been unable to resolve the complaint to your satisfaction within a period of 6 (six) weeks, you may refer the matter, within a further period of 6 (six) months, to The Office of the Ombud for Financial Services Providers. If the complaint is product-related, you may refer the matter, within a further period of 6 (six) months, to the Long-term Insurance Ombud.

5 A full record of each complaint received and all subsequent correspondence will be kept on record by AIMS for such periods as prescribed by relevant legislation.

6 AIMS should always be given the opportunity to resolve the complaint. However, if you are dissatisfied with the response from AIMS, you may refer your complaint to the Ombudsman or Adjudicator depending on the nature of the complaint, as set out below in more detail.

7 **Complaints relating to intermediary services provided by AIMS**

Only complaints relating to intermediary services provided by AIMS, as an Authorised Financial Services Provider, may be directed to the Financial Advisory and Intermediary Services Ombud ("**FAIS Ombud**"). The FAIS Ombud acts independently and objectively. Please note that AIMS does not give advice and any complaints relating to advice will not apply to AIMS. In complaints before the FAIS Ombud, the complainant and any other party to the complaint are expected to give their fullest co-operation so as to dispose of the complaint within a reasonable time. For these purposes a complainant includes their lawful successor in title or a person nominated as beneficiary in terms of the financial product that is the subject of the relevant complaint.

The Ombudsman for Long-term Insurance can be approached for living annuity and endowment-related complaints. The role of the Ombudsman is to ensure that the rights of the client are protected and to mediate in a dispute if required.

8 Complaints relating to AIMS/Absa Retirement Annuity, Pension Preservation and Provident Preservation funds ("**Retirement funds**").

The Pension Funds Adjudicator can be approached for complaints in respect of the retirement funds. The role of the Pension Funds Adjudicator is to ensure that the rights of members are protected and to mediate in a dispute if required.

9 The matter may be referred to our Insurer, in cases where the product is underwritten by a life insurance company. The insurer's details have been noted in the policy terms and conditions and will be provided at the complaint handling stage.

We have provided the relevant contact details below:

Head office	Postal/Physical address	Client Services	Email address	Fax number
Client Services/ Compliance Officer	PO Box 974 Johannesburg 2000	0860 000 005	aimscomplaints@absa.co.za	0861 339 265
The Office of the Ombud for Financial Services Providers	PO Box 74571 Lynnwood Ridge 0040	0860 FAISOM (0860 324 766)	info@faisombud.co.za	+27 12 348 3447
The Long-term Insurance Ombud	Private Bag X45 Claremont Cape Town 7735	+27 21 657 5000/ 0860 103 236	info@ombud.co.za	+27 21 674 0951
The Pension Funds Adjudicator	4th Floor, Block A Riverwalk Office Park, 41 Matroosberg Road Ashlea Gardens, 0181	+27 12 748 4000	enquiries@pfa.org.za	086 693 7472