

CHANGE OF DETAILS FORM - TRUST



IMPORTANT

- Familiarise yourself with the MTNZF Master Definition Schedules, Prospectus and MOI.
- The abovementioned documents can be found on the MTNZF website https://mtnzakhelefuthi.nedsecure.co.za/ or Call centre 010 476 2012.
- Please complete the relevant sections and return the form, with the required documentation as indicated on the checklist.
- Accept I-Ex and MTNZF Facilitated Trading Process Verification Terms and Conditions as well as the Singular Client Mandate Agreement.
- Once the form has been submitted, Singular Systems will verify the changes via SMS and email. For this reason, only investor details should be supplied in this form.
- Fields marked with * are <u>not</u> compulsory.
- The entity may appoint up to three Authorised Representatives.
- Complete Entity Details and the relevant sections where details are changing.

Scan here to send us a WhatsApp.



Complete information that has changed and provide supporting documents for the changes. Ensure that the information provided to Singular Systems is correct. You hereby indemnify Singular Systems against any loss or claims as a result of incorrect information provided. You also acknowledge that your

	illiorillation may be sent to a 5°	party for vernication purposes in terms of the rmandarintengence centre Act.
SE	CTION A: ENTITY DETAIL	LS
Tru	ust Name	

Trust Name				
Masters Reference Number				
Registration Jurisdiction				
Fax Number				
Physical Address				
Country				
Postal Code				
Postal Address				
Country				
Postal Code				
B-BBEE DETAILS (required for	verification and reportin	ng purposes for partici	pation in B-BBEE share schemes)	
Black ownership		%	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	%
Has the entity relied on the flow-thr	ough principle (as such te	erm is contemplated in	the BEE Codes) in establishing BEE status?	YES NO
NOMINATED BANK ACCO	UNT DETAILS (the b	ank account in which o	lividends and trade proceeds will be paid in	to)
Bank				
Account Holder				
Account Number	☐ Cheque ☐	Transmission	Savings	
SELECT ONE OF THE FOLLO	OWING TRADING	OPTIONS		

☐ The facilitated Trading Process	☐ The Independent Trading Process
This is where you use the appointed Trading Entity and the Custody Entity	This is where you use your own broker or agent to hold and trade your MTNZF Shares. This option
o provide trading and custody services in relation to your MTNZF Shares.	is not subsidised by MTNZF.



APPLICATION FORM- TRUST



FATCA AND CRS ENTITY CERTIFICATION

FATCA is a United States (US) tax regulation aimed at combating tax evasion of US persons. The objective of FATCA requires non-US financial institutions (foreign financial institutions (FFI's) to identify and report all their US account holders as well as entities under US control and to provide the American Internal Revenue Service (IRS) with information on their assets and income.

Singular is required to obtain and share information concerning your taxation status with tax authorities. FATCA requires reporting of client information directly to the IRS or via an inter-governmental agreement (IGA). The South African Government has entered into an IGA with the USA and as such we are required to obtain information on US citizens in accordance with IGA from 1 July 2014 and report such information to the South African Revenue Services.

Is the entity a tax resident of South	Africa and not residen	t of any oth	er country?					YES NO
Does the entity have any tax liabilit	ties in other countries?							YES NO
If you have ticked yes to the second	question please indicat	te all countri	ies in which	vou are resi	dent for tax n	urnose and th	ne foreign tax identification number (
Country	question pieuse inuieu	ic an countr			on Numb		ic foreign tax identification number ((1114).
· · · · · · · · · · · · · · · · · · ·						-		
SOURCE OF FUNDS								
	he EESE bank account.	Singular wi	ll contact inv	estors dire	ctly should p		ired on specific request to provide p e of funds be required. Singular rese	
Dividends ☐ Savings ☐	Business Proceeds Loans	_	Pension Winnings		Inheritar Gift/don		Self employed \Box Other \Box	
SECTION B: AUTHORISED								
Title	Mr 🔲 Mrs 🔲	Miss L	☐ Ms ☐	Dr 🗖	Rev 🗖	Adv 🔲 J	udge 🛘 Prof 📮 Other 🕻	
Names & Surname								
Identity Number								
Cell Phone Number								
Cell phone number belongs to	☐ Myself ☐ S	Someone	else					
Alternative number*	•							
Email Address*								
Email address belongs to	☐ Myself ☐ S	Someone	else					
Residential Address								
Country								
Postal Code								
Postal Address								
Postal Code								



APPLICATION FORM- TRUST



DECLARATION OF POLITICAL/PROMINENT INFLUENTIA	AL PERSON (Authorised Person)		
are you currently acting (for a period exceeding 6 months) or have you act	ed in any of the following positions during the preceding 12	YES	
nonths, locally or in a foreign country*			
 Any national, provincial, or municipal governmental function or as a leader of a r 	egistered nolitical party	NO	ш
A member of a royal or senior traditional leader.	South of Political Party.		
	son who is the accounting authority or chief financial officer or chief investment of officer	cer of a public entity I	listed
	entity as defined in section 1 of the Local Government: Municipal Systems Act, 2000.		
A judicial officer.An Ambassador, High Commissioner, or other senior representative of a foreign	reverement based in South Africa		
 All Allibassador, Fight Commissioner, or other senior representative of a foreign; A high-ranking member of the military. 	government based in South Africa.		
 A senior executive of a state-owned corporation. 			
	n organ of state i.e. as chairperson of the board of directors or audit committee, or as	s executive officer or	chief
financial officer.			
 A senior position held at an international organisation based in South Africa. 			
FATCA AND CRS SELF-CERTIFICATION (Authorised Person)			
	of the control of the chiral configuration of the chiral control o	. (f f	_
	of US persons. The objective of FATCA requires non-US financial institutions as entities under US control and to provide the American Internal Revenue S		
ingular is required to obtain and share information concerning your taxatio	n status with tax authorities. FATCA requires reporting of client information of	directly to the IRS o	r via
	entered into an IGA with the USA and as such we are required to obtain info	ormation on US citiz	zens
n accordance with IGA from 1 July 2014 and report such information to the	South African Revenue Services.		
are you a tax resident of South Africa and not resident of any other count	y?	YES 🔲 NO	
o you have any tax liabilities in other countries?		YES NO	
			' -
	which you are resident for tax purpose and the foreign tax identification nur Tax Identification Number	mber (TIN):	
Country	rax identification number		
By signing this form, we hereby confirm, acknowledge and warrant to MTI	177 that.		
We have read and understood the Master Definitions Schedule			
We, the entity identified as the Investor in this Form, hereby re	presented by the undersigned Authorised Representative, have full legal cap	acity and are duly	
authorised to apply to become an Eligible MTNZF Shareholder.			
 We are a Black Entity as defined in the Definitions Schedule and and correct in all respects. 	d that all of the information provided by us in this Form (including all Support	ting Documents) is	true
·	nd complete and MTNZF may rely on it in making its decision to accept this Fo	orm. We further wa	arrant
·	one of our Supporting Documents, our ownership structure has not changed		
Valid BEE Ownership Certificate and the information recorded	·		
· · · · · · · · · · · · · · · · · · ·	led by us in this Form replaces and supersedes that prior form, from the date upon the Disposal and/or Encumbrance of the MTNZF Shares as set out in the	•	
and summarised in paragraph 12 of Section 2 of the Prospectus	· · · · · · · · · · · · · · · · · · ·	; Relationship Agree	ement
· - ·	ansferred to us, we will comply with the terms of the MTNZF MOI including a	all the restrictions	
=	our of MTNZF and MTN that we will be bound by the provisions of the Relation		
understand that if we contravene these restrictions and/or bre in us losing any benefit which we would otherwise have had in	ach the terms of the Relationship Agreement we may have action taken agai	nst us which may re	esult
	to assist in such verification promptly, when requested to do so.		
, ,	rtake that, with immediate effect from the date of acquisition of any MTNZF	-	ıeficial
	sions of the Relationship Agreement and the MTNZF MOI and all the terms the	hereof will be	
 enforceable against us by the relevant parties to the Relationsh We have read and understood the Privacy Policy available on the 	iip Agreement as from the date of such acquisition. ne MTNZF Website which sets out how MTNZF may use our Personal Informa	ation (as defined in	the
Privacy Policy), and which may be updated from time to time.			
			_
Name and Surname of Authorised Person Si	gnature Date		—
	,		
	3		



APPLICATION FORM- TRUST



SECTION C: IVIEIVIBER (to be comp	leted by each Party to the Trust (i.e	. Founder, Tr	ustee or Beneficiary))			
Party to					(entity	name)
Full name and surname / Entity name						
Identity number/ Registration number Entity			. 🗖 .			
•	Individual Trust C			<u> </u>		
Capacity	Founder Beneficiary	1 Trustee				
Voting Right	%					
Cell phone number						
*Email Address						
Physical Address						
Country						
Postal Code						
D DDEE DETAILS (
B-BBEE DETAILS (applicable to legal	persons with who are party to the					
Race	d12		n 🗖 Asian 🗖 Indian 🗖	Coloured White		
Are you a South African citizen by birth or		☐ YES	□ NO			
Were you naturalised before 27 April 1994	1?	☐ YES	□ NO			
Do you hold a south African identification of African citizen?	document but you are not a South	☐ YES	□NO			
ENTITY WITH VOTING RIGHTS Black ownership Has the entity relied on the flow-through p DECLARATION OF POLITICAL/F Are you currently acting (for a period excomonths, locally or in a foreign country*	% orinciple (as such term is contemplat PROMINENT INFLUENTIAL	Black femal ed in the BEE	e ownership Codes) in establishing BE applicable to legal perso	ons with voting rights)	YES NO	% □
 Any national, provincial, or municipal gove 	rnmental function or as a leader of a regi	stered political	party.		NO	ч
A member of a royal or senior traditional le						
 The chairperson of the controlling body, the in Schedule 2 or 3 to the Public Finance Ma A judicial officer. 						y listed
 An Ambassador, High Commissioner, or ot A high-ranking member of the military. 	her senior representative of a foreign gov	ernment based	l in South Africa.			
 A senior executive of a state-owned corpo 	ration.					
 A position in a privately-owned company financial officer. 		rgan of state i.	e. as chairperson of the boa	rd of directors or audit comr	nittee; or as executive officer o	or chief
A senior position held at an international or	organisation based in South Africa.					
Name and Surname					Date	
Name and Surname	Signatu	TE .			Date	
			4			
	@ Fmail: mtnzf@singular co za	□ Pc	st: PO Box 1266: Bramley: 2	2018 Q Address: 25 Sc	ott Street Waverley 2090	



CHECKLIST - TRUST



CHECKLIST:

- Please submit all of the required supporting documents. There may be additional documentation requirements not specified below
- Please note that documents requiring certification must be certified by SAPS or an independent commissioner of oaths and must include the commissioner's details and date. Documents consisting of more than one page require certification on the first and last page.
- Original documents may be presented in person at the Walk-in centre: Singular Systems, 25 Scott Street, Waverley, 2090.
- Indicate documents submitted with an "X" in the relevant column as indicated.

TRUST X

11(03)						
Trust deed and Letter(s) of Author	Trust deed and Letter(s) of Authority issued by the Master of the High					
ity	Court to each trustee.					
Bank account details	Bank statement or letter on bank letterhead.					
	 Must reflect business or trading name and bank account number. 					
	■ Must not be older than 3 months					
Proof of physical address	 Utility bill, lease or rental agreement, bank statement, telephone 					
	account or any other third-party document from a credible source.					
	Must reflect at least business or trading name and physical address (or					
	Erf number).					
	• Must not be older than 3 months.					
BEE Ownership Certificate	■ BEE Certificate issued within in the last 12 months by a SANAS					
	accredited verification agency which reflects ownership as calculated					
	using a flow-through principle:					
	 % exercisable voting rights of Black People (compulsory); 					
	and					
	o economic interest of Black People (compulsory).					
	For a business with a turnover of less than R50 million, an affidavit for					
	a B-BBEE Qualifying Small Enterprise made by a duly authorised					
	representative of the company within the last 12 months.					
Proof of income tax number	■ Document issued by SARS confirming income tax number.					
	Must not be older than 12 months.					
Dividend tax	 Dividends Withholding Tax Exemption form (if applicable). 					

FOUNDER, TRUSTEES AND BENEFICIARIES

X

Natural Person Identity document	 Certified green bar-coded South African identity book, smart identity card (copy of both sides) or valid South African Passport reflecting the applicant's SA identity number. Must reflect a clear picture, which is a reasonable likeness of the person. Document must be certified by an independent commissioner of oaths within the last 6 months. 	
Trust	 Trust deed and Letter(s) of Authority issued by the Master of the High Court to each trustee. 	
Close Corporation	 Founding Statement and Certificate of Incorporation (CK1) or Amended Founding Statement (CK2) and Amended Founding Statement in respect of Accounting Officer and Addresses (CK2A), if applicable. 	



Proof of authority

APPLICATION FORM— TRUST



Company	 Certification of Incorporation (CM1) and Memorandum of Incorporation (CM2), and any other forms amending company information, if applicable (e.g., Certificate of Change of Name of Company (CM9)). OR Registration Certificate (CoR14.3) and Memorandum of Incorporation (CoR15.3) and any other forms amending company information, if applicable (e.g., Amendment of Memorandum of Incorporation (CoR15.2)). 	
AUTHORISED REPRESENTATIVE (S)		Х
Identity document	 Certified green bar-coded South African identity book, smart identity card (copy of both sides) or valid South African Passport reflecting the applicant's SA identity number. Must reflect a clear picture, which is a reasonable likeness of the person. Document must be certified by an independent commissioner of oaths 	

Please note that the above requirements are in compliance with The Financial Intelligence Centre Act No. 38 of 2001, as amended (FIC Act) which requires all accountable institutions to verify the details of any legal person (juristic or natural) prior to transacting with them. Therefore, the submission of documents that do not meet the exact criteria specified above will result in a delay in verification. Documents received for the purpose of identification and verification of any legal person, are retained for a period of five years from the date that a single transaction was entered into or the business relationship was terminated.

• A valid resolution of the board of trustees giving authorisation for the representative to sign documentation and give instructions on behalf

within the last 6 months.

of the company.

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Complaints Process: In the event that you are dissatisfied with any aspect of our service, you may contact our offices at 25 Scott Street, Waverley, 2090 or log a written complaint to customercare@singular.co.za.

If you cannot settle your complaint with us, you are entitled to refer it to the FAIS Ombud. The Ombud has been created to provide you with a redress mechanism for any inappropriate financial advice that may have been given to you.

Contact details of the Ombud Telephone: +27 12 762 5000 / +27 12 470 9080 Facsimile: +27 86 764 1422 / +27 12 348 3447

E-mail Address: info@faisombud.co.za Website: www.faisombud.co.za

Physical Address: Sussex Office Park, Ground Floor, Block B, 473 Lynnwood Road Cnr Lynnwood Road & Sussex Ave, Lynnwood, 0081 Postal Address: PO Box 74571, Lynnwood Ridge 0040