



# TRANSFER INDIVIDUALS / ENTITY

Boutique Collective Investments (RF) (Pty) Ltd administers the BCI unit trusts. It is authorised to do so as a Manager, in terms of the Collective Investment Schemes Control Act. In this document it will be referred to as "BCI".

# IMPORTANT INFORMATION

- 1. This form is to be used by existing investors only.
- 2. Please read the Terms and Conditions that apply to this investment. This is available from your financial adviser, the Client Service Centre or at www.bcis.co.za
- 3. Please email required documents to the Client Service Centre at <a href="mailto:instructions@bci-transact.co.za">instructions@bci-transact.co.za</a> or fax to (0)86 502 5319.

4. The cut-off for instruct	ions is 14:00, Money N	larket cut-off is 11	1:30. If received at	ter the cut-off the	next business day pi	icing wi	ll app	ly.	
SECTION 1: CURRENT	INVESTOR DETAILS	S							
BCI Investor Number / Clier	nt Account Number								
Title									
Surname / Entity Name (e.g	company or trust)								
Name of Investor / authoris	ed contact person								
ID or passport number / Reg	gistration number								
Telephone numbers	Home				Work				
	Mobile								
Email address									
Signature of transferor					Date DD / MM	/ Y	YY	Υ	
SECTION 2: INVESTMI	ENT TRANSFER DE <sup>-</sup>	TAILS							
Would you like <b>all</b> your unit	s to be transferred:	Yes	No						
If No, Please indicate how y	our unit trust portfolio	/s should be trans	ferred in the table	e below:		_			
Unit Trust Po	ortfolio	Account Number	Total am	ounts	Units	F	ercen	tage	
				0	r	or	$\sqcup$	- 19	%
				0	r	or		- 19	%
				0	r	or	$\sqcup$	- 19	%
				0	r	or		- !	%
				0	r	or	$\sqcup$	- 19	%
TOTAL						1	0	0	%
The transfer of participatory may choose to have the ever "yes" is selected, please supp	nt rolled over to the tra	nsferee. Please no							L
Roll over CGT event for this	transfer:	Yes	No						
Signature of transferor				С	Date DD / MM	/ Y	YY	Υ	]
SECTION 3: INVESTOR	R DETAILS TRANSFE	RRING TO							
If transferee is not an existin			ete an application	form and forward	to us with all your FIC	:A docur	nenta	tion	
BCI Investor Number / Clier	_				,				
Title									
Surname / Entity Name (e.	g company or trust)								
Name of Investor / authoris	ed contact person								
ID or passport number / Reg	gistration number								
Telephone numbers	Home				Work				
	Mobile								
Email address									
Residential / Physical / Regi	istered address								
				Postal	Code				
Postal address (if different f	rom above)				Dest-1	Codo			
					Postal	coae Ini	tial		

## **SECTION 4 CORRESPONDENCE CHOICE**

In order to view and access the below documents, please register for online access, alternatively email clientservices@bcis.co.za.

- Investment statements, tax certificates;
- + Transaction confirmations when you transact on your account

Online Access (Will enable you to view your statements / correspondence, upload instructions and transact online).

Would you like to transact online? Yes No Would you like viewing access only? Yes No

## **SECTION 5: BANKING DETAILS**

#### **Distribution Payments**

Distributions to be re-invested OR Distributions paid into account as per the 'Investor bank account details below'

Account holder

Bank

Branch name Branch code

Account number

Account type Current Savings Transmission

**Debit Order Details** 

Total to be collected R commencing on the 1st OR 15th of MM / Y Y Y

Debit orders are applied on the 1st or the next business day. The cut-off for all debit order notices to be processed in a particular month is by 14:00, five business days before the selected day.

## **SECTION 6: INVESTOR DECLARATION**

- + I confirm that all information provided herein is true and correct and that I have read and understood the contents of this form.
- I have read, understood and agree to the Terms and Conditions.

	 1			_					
Signature of Transferee	Date	D	D,	' N	1 M	/	Y	ΥY	Υ

# **CONTACT DETAILS**

## Physical Address

**Boutique Collective Investments** 

Catnia Building Bella Rosa Village

Bella Rosa Street Bellville

7530

### Custodian / Trustee

The Standard Bank of South Africa Limited

Tel: +27 (0)21 441 4100

### Contact us

Tel: +27 21 007 1500/1/2 | +27 21 914 1880 | (0)87 057 0571 | f: (0)86 502 5319

Email: clientservices@bcis.co.za | compliance@bcis.co.za

Visit our website: www.bcis.co.za

Should you have any complaints, please send an email to complaints@bcis.co.za

ASISH

AN ORDINARY MEMBER OF THE ASSOCIATION FOR SAVINGS & INVESTMENT SA