

**Please note:** Once you have completed this form, please email it to [transfers@satrixnow.co.za](mailto:transfers@satrixnow.co.za)

**SECTION A - INVESTOR DETAILS** (This is a **mandatory** section which **MUST** be completed by the Investor)

**MY PERSONAL DETAILS**

Title: \_\_\_\_\_ First Name(s): \_\_\_\_\_ Surname: \_\_\_\_\_

South African ID number: \_\_\_\_\_ **OR** Foreign Passport number: \_\_\_\_\_

Tax reference number (if applicable): \_\_\_\_\_ Country of Tax Registration: \_\_\_\_\_

Mobile phone number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PRODUCT TO BE TRANSFERRED FROM**

Product Provider name: \_\_\_\_\_

Tax Free Savings Account Product name: \_\_\_\_\_

Tax Free Savings Account number to be transferred from: \_\_\_\_\_

Estimated value of transfer: R \_\_\_\_\_

Contact person at Transferring Product Provider: \_\_\_\_\_

Email address: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Transfer Type\*: ☐ Rand Value or ☐ Units ETF/ Shares or ☐ Rand & ETF / Shares

**Note:** When selecting the transfer type, please ensure that the receiving product provider is able to accommodate the transfer type selected

Transfer Amount: ☐ 100%/ Full Transfer OR ☐ Partial Transfer

If partial transfer is unit based or is not proportional, please specify the amount to be transferred in the table in Appendix A, attached hereto:-

**Note:**

Please ensure that all the transferring provider's requirements are met when submitting the Tax-Free Savings Account Transfer Request Form to them. If these requirements are not met the transfer process cannot be commenced.

**INVESTOR / GUARDIAN / PERSON WITH POWER OF ATTORNEY DECLARATION**

- I hereby request that the above-mentioned Tax-Free Savings Account be transferred to the below Receiving Product Provider.
- I confirm that all the information provide above is true and correct

Signature of Investor: \_\_\_\_\_ Date: \_\_\_\_\_



Satrix Managers (RF) (Pty) Ltd  
Building 2, 4<sup>th</sup> Floor, 11 Alice Lane, Sandton 2196, South Africa

Satrix Managers (RF) (Pty) Ltd Reg no 2004/009205/07  
Refer to the Satrix website for directors and company secretary details.

[www.satrix.co.za](http://www.satrix.co.za)

**ACTING ON BEHALF OF THE INVESTOR (OPTIONAL if applicable)**

Guardian / person with Power of Attorney acting on behalf of the investor. Proof to be provided. *[Additional information can be requested based on business requirements]*

Title: \_\_\_\_\_ First Name(s): \_\_\_\_\_ Surname: \_\_\_\_\_

South African ID Number: \_\_\_\_\_ OR Foreign Passport number: \_\_\_\_\_

Relationship to investor: \_\_\_\_\_

**SECTION B – TRANSFER TO** (To be completed by SatrixNOW AND the investor)

**Please note:** The only part of this section Investors need to complete is the TFSA account number in the cell highlighted below

Product Provider name: **Satrix Managers (RF) PTY LTD**

Company Registration number: **1967/002865/07** Tax Reference Number: **9360158027**

Tax Free Savings Account Product name: **SatrixNOW TFSA**

SX number / user ID to be transferred into (if applicable): **SX** - TFSA Transfer

Please refer to this FAQ article – How do I find my SX number / user ID?

Contact person: **Nothando Thwala**

Email address: [transfers@satrxnow.co.za](mailto:transfers@satrxnow.co.za)

Email address for receipt of Tax Free Savings Account Transfer certificate: [transfers@satrxnow.co.za](mailto:transfers@satrxnow.co.za)

**BANKING DETAILS**

Name of Account: **Satrix Nominees (Pty) Ltd**

Bank: **ABSA Bank Limited**

Account number: **4104339515**

**Branch Code: 630305**

Payment Reference number: **Please use the 5-7 digit SX number you have captured above.**



**SATRIXNOW CSDP DETAILS: For use by client's existing broker from which they are transferring holdings**

<i>CSDP</i>	<i>Account Number into which units are to be transferred</i>	<i>Standard Chartered BIC</i>	<i>Standard Chartered BP ID</i>
<i>Standard Chartered</i>	<i>0000001914120901</i>	<i>SCBLZAJ2XXX</i>	<i>ZA500080</i>

**ON BEHALF OF RECEIVING PRODUCT PROVIDER**

- The account to be transferred into is a Tax-Free Savings Account as defined in Section 12T of the Income Tax Act.
- We accept the above Tax Free Savings Account transfer and confirm that the above transfer request will be processed in terms of the Regulations of Section 12T(8) of the Income Tax Act.

Name of representative: **Nilan Morar**

Signature



Capacity of representative: **VP of Trading**

**Please note:** The transfer process can take between 10-20 business days to complete as there are 3rd parties involved.



**Please note:** It is crucial to the success of your transfer that you detail the name, quantity of shares and cost prices of those shares in the correct columns in the table below.

[illegible]

*\*Please attach an up to date statement reflecting unit/ETF shareholdings after ensuring unit/ETF share transfers are accepted by the transferring company*

\*\* Confirm any minimum or maximum percentage with transferring product provider

**I hereby authorize that Satrix Managers (RF) PTY LTD may use the information herein to report to SARS.**

Kind regards,

**SIGNATURE**

**FULL NAME AND SURNAME**

Satrix Managers (RF) (Pty) Ltd  
Building 2, 4<sup>th</sup> Floor, 11 Alice Lane, Sandton 2196, South Africa

Satrix Managers (RF) (Pty) Ltd Reg no 2004/009205/07  
Refer to the Satrix website for directors and company secretary details.

[www.satrix.co.za](http://www.satrix.co.za)