Capricorn Asset Management
a member of Capricorn Group

S-1
v2024.01

UNIT TRUST SWITCH INSTRUCTION – NATURAL PERSON

When you should use this form

This document is intended for investors who wish to transfer or phase-in funds from one unit trust fund already invested on the investment platform to another fund within the same entity. Both funds should already be active. Please complete the Additional Unit Trust Investment (B-1) form for switches intended for new funds.

Important Information

1. Capricorn Asset Management is the Administrator of the Investment Platform.
2. Please refer to the Investment platform fund summary and the Investment platform terms and conditions for all information regarding the Administrators' processes, fees and the funds on offer. These documents are available at any Bank Windhoek branch, your financial advisor, or via our website at www.cam.com.na. For any queries contact our Sales & Channel support at (+264 61) 299 1950 or via email at cam.info@capricorn.com.na.
3. This instruction may be submitted to your financial advisor, handed in at any Bank Windhoek branch, at the offices of the Administrator at 3rd Floor Capricorn Corner, c/o Nelson Mandela and Hofmeyer Street, Klein Windhoek, Windhoek or via email at cam.service@capricorn.com.na.
4. Instructions will only be processed once all fields are duly completed and the required documents are received.
5. The minimum switch amount is N$1,000.

Investor Details

Surname		Client No.	
Full Name(s)			

Switch Details

When completing this form, please take note of the following disclosures, which are relevant to switch instructions:

- Certain switches may have tax implications for an investor; and
- Different funds have different investment aims, investment horizons and investor risk profiles, which means that switching from one fund to another could affect your ability to reach your original investment goals.

The Administrator strongly recommends that you seek appropriate financial or investment advice and tax advice before instructing the Administrator to effect a switch.

Switch From (Fund Name)	**Acc #**	**Switch All Funds? (Y/N)**	**Lump Sum Amount**	**Recurring Amount[1]**
			N$	N$
			N$	N$
			N$	N$
Total			**N$** 0.00	**N$** 0.00
Switch To (Fund Name)	**Acc #**	**Phase-in[2]**	**Lump Sum Amount**	**Recurring Amount[1]**
		☐	N$	N$
		☐	N$	N$
		☐	N$	N$
Total			**N$** 0.00	**N$** 0.00

Recurring Switch[1]

Start date		End date	
Collect Every	Of the month	Annual Escalation %/N$	

Phase-in Details[2]

Start date				End date	
Phase in frequency	☐ Monthly	☐ Quarterly	☐ Annually	Collect every (specific date)	Of the month

Financial Advisor and Fee Details

☐ I have completed the Risk Assessment as provided by the Administrator; thus, my investment is based on my particular risk tolerance and capacity and risk required to take on risk. I hereby accept that if there are any life changes it may have an effect on my investment goals and portfolio and need to reassess my investment portfolio.

☐ I declare that I did not complete the Risk Assessment as provided by the Administrator and thus my investment option is not based on my particular risk tolerance and capacity to take on risk.

☐ I declare that I choose not to receive any financial advice in my decision to invest and as a result, no advisory fees are payable on my investment.

☐ I hereby confirm that the person or firm, whose details are completed below, is my appointed financial advisor. I agree to pay the fees indicated below on my investments until otherwise specified (please complete the section below). This authorisation includes rebalancing my portfolio, switching between different portfolios, changing income levels, effecting additional investments on my portfolio and repurchasing on my behalf into my bank account. No 3rd party payments will be allowed.

Should the existing Financial Advisor agreement be applied? If no advice has been provided or taken, leave both boxes unchecked.	☐ Yes	☐ No[3]	Please complete below. This will supersede all previous arrangements	
[3]Financial Advisor Name			Advisor Code	
Practice / Company Name				
Initial Advice Fee (Once Off Fee)	%	Negotiable to a maximum of 2%, applicable to each contribution and deducted before an investment is made.		
Recurring Advice Fee	%	Negotiable to a maximum of 2% of the investment portfolio market value. The fee is charged proportionally, monthly in arrears.		
	The Annual Fee selected above should be deducted from the investor's investment portfolio as follows:			
	☐ Highest valued Fund	☐ Proportional from all Funds	☐ Other Fund (please specify)	
Discretionary Mandate Declaration	☐ Viewing/Information mandate only	☐ Transaction Rights (Full mandate) (sign below)[4]		

[4]I authorise the Financial Advisor, whose name appears above, to give instructions to the Administrator, and I authorise the Administrator to accept and execute all instructions, except changes in banking details, so submitted by the Financial Advisor on my behalf. I further acknowledge that all terms and conditions accepted by my Financial Advisor will be deemed accepted by myself and that I will be bound by all such terms and conditions.

Signature of Investor_____

Financial Advisor Declaration

- I have properly explained all the relevant investment risks to the investor.
- I have disclosed and explained all fees and commissions payable by the investor that relate to this investment.
- I have identified all applicable parties to this transaction and verified their details under the requirements of the Financial Intelligence Act of 2012 as amended from time to time.
- I declare and warrant that I am duly authorised to render financial services.

Signature of Financial Advisor_____

Investor Declaration

- By my signature to this application form I acknowledge that I have been made aware of, understand and accept –
  - That all previous declarations made by me as well as the latest Capricorn investment platform terms and conditions and Bank Windhoek Application End-User Licence Agreement (the "Terms") will remain binding upon me;
  - That the Administrator has the right, without prior notice to me, to change, modify, add to or remove from portions or the whole of the Terms from time to time. Changes to the Terms will become effective upon such changes being posted to the Website.

Signature of Investor/Financial Advisor _____ **Date** _____

For Bank Windhoek Branches/Broker House/CPW/CAM Official Use Only: **(Please email to cam.service@capricorn.com.na and send the original to the Administrator's Office)**	
I the undersigned confirm that I have identified & verified the investor.	**To be completed by Bank Windhoek Branch / Financial Advisor/ CAM Official/ CPW Official.**
Bank Windhoek Branch / Broker House	
Bank Windhoek Official Name / Advisor Name / CAM Official Name	
Employee no/ Broker Code	
Contact Number	
Signature of Bank Windhoek Official / Advisor / CAM Official	