

## PERSONAL DETAILS / ADDRESS UPDATE

### INDIVIDUALS / ENTITY

Boutique Collective Investments (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](http://www.bcis.co.za)
3. Please fax required documents in checklist below to our Client Service Centre - (011) 263 6152 | email: [instructions@bci-transact.co.za](mailto:instructions@bci-transact.co.za)
  - Proof of new address if address changed
  - Proof of banking details if banking details changed

#### SECTION 1: CURRENT INVESTOR DETAILS

|                                              |                      |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
|----------------------------------------------|----------------------|----------------------|--|--|--|--|--|--|-------------|----------------------|----------------------|--|--|--|--|--|--|--|
| BCI Entity / Client Account Number           | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| Title                                        | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| Surname / Entity (e.g company or trust) Name | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| Name of Investor / authorised contact person | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| ID or passport number / Registration number  | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| Telephone numbers                            | Home                 | <input type="text"/> |  |  |  |  |  |  |             | Work                 | <input type="text"/> |  |  |  |  |  |  |  |
|                                              | Mobile               | <input type="text"/> |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| Email address                                | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
| Residential / Physical / Registered address  | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
|                                              | <input type="text"/> |                      |  |  |  |  |  |  | Postal Code | <input type="text"/> |                      |  |  |  |  |  |  |  |
| Postal address (if different from above)     | <input type="text"/> |                      |  |  |  |  |  |  |             |                      |                      |  |  |  |  |  |  |  |
|                                              | <input type="text"/> |                      |  |  |  |  |  |  | Postal Code | <input type="text"/> |                      |  |  |  |  |  |  |  |

#### SECTION 2: UPDATE INVESTOR DETAILS

Information completed below will be updated on our system if different from that which we have on record

|                                                                   |                                      |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
|-------------------------------------------------------------------|--------------------------------------|----------------------|---------------------------------|--|---------------------------------|--|--------------------------------|--|-------------|----------------------|----------------------|--|--|--|--|--|--|--|
| Title                                                             | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
| Surname / Entity (e.g company or trust) Name                      | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
| Name of Investor / authorised contact person                      | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
| Please confirm which contact details you would like us to update: | <input type="checkbox"/> Home        |                      | <input type="checkbox"/> Work   |  | <input type="checkbox"/> Mobile |  | <input type="checkbox"/> Email |  |             |                      |                      |  |  |  |  |  |  |  |
| Telephone numbers                                                 | Home                                 | <input type="text"/> |                                 |  |                                 |  |                                |  |             | Work                 | <input type="text"/> |  |  |  |  |  |  |  |
|                                                                   | Mobile                               | <input type="text"/> |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
| Email address                                                     | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
| Please confirm which address you would like us to update:         | <input type="checkbox"/> Residential |                      | <input type="checkbox"/> Postal |  | <input type="checkbox"/> Both   |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
| Residential / Physical / Registered address                       | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
|                                                                   | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  | Postal Code | <input type="text"/> |                      |  |  |  |  |  |  |  |
| Postal address (if different from above)                          | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  |             |                      |                      |  |  |  |  |  |  |  |
|                                                                   | <input type="text"/>                 |                      |                                 |  |                                 |  |                                |  | Postal Code | <input type="text"/> |                      |  |  |  |  |  |  |  |

#### SECTION 3: CORRESPONDENCE METHOD

We will send you, or the person acting on your behalf, the following types of correspondence:

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

Please select how you would like to receive these: ☐ Email ☐ Post

## SECTION 4: BANKING / PAYMENT DETAILS

Would you like this bank account change to apply to all your recurring debit orders:

☐

Yes

☐

No

Account Holder

Bank

Branch Name

Branch code

Account Number

Account Type

☐

Current

☐

Savings

☐

Transmission

Date for change of bank details to become effective:

/

/

Please confirm debit order change:

☐

Increase

☐

Decrease

☐

Cancel

R

Effective date

/

/



Signature of investor(s) or legal guardian

Date




## CONTACT DETAILS



### Physical Address

Boutique Collective Investments  
Unit AC13, Ground Floor Acorn House,  
Old Oak Office Park  
Cnr Old Oak Road & Durban Road  
Bellville  
7530

### Contact us

Tel: +27 (0)21 007 1500/1/2 | Fax: +27 (0)86 502 5319 | Email: [clientservices@bcis.co.za](mailto:clientservices@bcis.co.za)  
Visit our website: [www.bcis.co.za](http://www.bcis.co.za)

Should you have any complaints, please send an email to [complaints@efgroup.co.za](mailto:complaints@efgroup.co.za)

ASISA

AN ORDINARY MEMBER OF THE ASSOCIATION FOR SAVINGS & INVESTMENT SA