

To enable Old Mutual Unit Trust Company (Malawi) Limited to process this application form, please ensure that it is completed in FULL and that all required verification documentation is submitted together with this form. The applicant must initial all pages of the form and any alterations made to it. Please submit the correctly completed application form and supporting documents to any Old Mutual Branch or post it to: Old Mutual Unit Trust Company (Malawi) Limited, Old Mutual Building, 30 Glyn Jones Road, P O Box 393, Blantyre, Malawi.

**IMPORTANT INFORMATION:**

- Direct deposits and electronic transfers can be made to the following bank account:
  - Bank:** Standard Bank
  - Branch:** Corporate Banking Centre Branch
  - Branch code:** 010002
  - Swift Code:** SBICMWMX
  - Account Name:** Old Mutual Unit Trust Company Malawi Limited – Clearing Account
  - Account Number:** 9100000417553
- Please use your surname and Old Mutual Unit Trusts client number as reference for the deposit or electronic transfer
- Direct deposits and electronic funds transfers made into our account will only be processed on receipt of the cash and matching to a corresponding application form. Kindly deliver proof of payment to us.
- Cheque deposit values will only be accounted for on the day the cheque is cleared
- Old Mutual Unit Trusts does not accept cash payments/ deposits at our premises and our sales agents are prohibited from collecting cash from customers.**

Please print clearly using BLACK ink in BLOCK letters and tick (✓) where appropriate.

**A. PARTNERSHIP DETAILS**
**Partnership & partners**
**General information**

Full name of partnership:

Registered business name of partnership (if any)

Registration number for partnership

Country where partnership established

**Type of partnership**

Is the partnership regulated by a professional association? YES  NO

If "YES": Name of association:

Membership details:

**Address Details:**
**Address for correspondence**

Postal Address

City/District:

Country:

Telephone:  Mobile:

Fax:  E-mail:

Proof of address: Latest telephone bill (only landline)  Registered lease/sale agreement of residence

Latest water bill  Latest electricity bill

NB: Not more than three months old

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**Details of Partners**

Provide number of partners:

Provide partnership details (for each partner)

1st Partner: Full Given Name(s):

Surname:

Residential address:

ID Type  ID Number

District/City:  Country:

Date of birth:  Politically exposed

2nd Partner: Full Given Name(s):

Surname:

Residential address:

ID Type  ID Number

District/City:  Country:

Date of birth:  Politically exposed

3rd Partner: Full Given Name(s):

Surname:

Residential address:

ID Type  ID Number

District/City:  Country:

Date of birth:  Politically exposed

4th Partner: Full Given Name(s):

Surname:

Residential address:

ID Type  ID Number

District/City:  Country:

Date of birth:  Politically exposed

**B: FATCA INFORMATION FOR PARTNERS AND PARTNERSHIPS)**

**Partnerships and partners**

**United States Partnership** (a partnership created in the US, established under the laws of the US or a US taxpayer)

Provide the Partnership's US TIN:

Is the partnership an exempt payee for US purposes? **YES**  **NO**

**Financial Institution** (a custodial or depository institution, an investment entity or a specified insurance company for FATCA purposes)

Partnership's Global Intermediary Identification Number (GIIN), if applicable

**Other** (partnerships that are not US partnerships)

Are any of the partners US citizens or residents of the US for tax purposes? **Yes**  **No**

If yes, provide details of each partner who is a US citizen or resident of the US for tax purposes

1st Partner: Full Given Name(s):   
Surname:   
Residential address:   
District/state/city:  Country:   
US TIN:

2nd Partner: Full Given Name(s):   
Surname:   
Residential address:   
District/state/city:  Country:   
US TIN:

3rd Partner: Full Given Name(s):   
Surname:   
Residential address:   
District/state/city:  Country:   
US TIN:

4th Partner: Full Given Name(s):   
Surname:   
Residential address:   
District/state/city:  Country:   
US TIN:

### C. INVESTMENT DETAILS

I/We hereby apply to invest in the Old Mutual Unit Trust Company (Malawi) Limited in accordance with the provision of the relevant Deed of the Funds at the respective fund/s price/s ruling on the date of receipt of the monies by Old Mutual Unit Trust Company (Malawi) Limited subject to receipt of a duly completed Application Form, proof of deposit, proof of source of funds and all relevant supporting documentation.

	Lump Sum Investment	Debit Order Investment
Gross Investment Amount	MWK <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	MWK <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>
<b>Fund Name</b>	<b>Initial Lump Sum Investment (MWK)</b>	<b>Debit Order Investment (MWK)</b>
Money Market Fund	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> or <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> %	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> or <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> %
Balanced Fund	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> or <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> %	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> or <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> %
	<input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> 1 0 0 %	<input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> 1 0 0 %

*\*Minimum initial lump sum and debit order investment is MWK 50,000.00 and MWK 30,000.00 respectively  
 \*Please note: if no Fund is specified, the investment will be applied to the Money Market Fund.*

	<b>Money Market Fund</b>	<b>Balanced Fund</b>
Income Distributions:	Reinvest <input type="checkbox"/> Pay out <input type="checkbox"/>	Reinvest <input type="checkbox"/> Pay out <input type="checkbox"/>

Old Mutual Unit Trust Company (Malawi) Limited will by default reinvest all distributions unless instructed otherwise.  
 Your Distributions payment will be done by Electronic Fund Transfer only.

**To help ensure my investment amount keeps pace with inflation, please increase my debit order investment amount every**

Year on the anniversary date by:  % or MWK

### D. PAYMENT DETAILS

Please specify payment method to be used:

Direct deposit:  Electronic Fund Transfer (EFT)  Cheque  Regular debit order

To be debited on:  1st  22nd  25th  28th of each month commencing  /

I/We hereby instruct and authorise Old Mutual Unit Trust Company (Malawi) Limited to draw against the nominated bank account, the amounts specified in this application form. All such withdrawals from my/our bank account by Old Mutual Unit Trust Company (Malawi) Limited shall be treated as though they had been signed by me/us personally:

### E. DEBIT ORDER BANKING DETAILS

Name of Account holder:

Please note that the bank account specified must be in the name of the Investor/his approved representative (if minor)

Bank	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	Account Number	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>
Branch	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	Branch Code	<input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
Type of Account:	Current <input type="checkbox"/> Savings <input type="checkbox"/>	Other (Specify)	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>

Debit order changes will only be effective four (4) days after the instruction is submitted.

### F. PAYMENT BANKING DETAILS (ANY PAYMENT TO THE INVESTOR WILL BE MADE TO THIS ACCOUNT ONLY UNLESS FORMALLY CHANGED)

Name of Account holder:

Please note that the bank account specified must be in the name of the Investor

Bank	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	Account Number	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>
Branch	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	Branch Code	<input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
Type of Account:	Current <input type="checkbox"/> Savings <input type="checkbox"/>	Other (Specify)	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>

No payment will be made to third parties (i.e. payments will only be made to the bank account in the name of the registered investor).

## G. FEES

### • Old Mutual Money Market Fund Class

Admin Fee  .  %

Maximum 0.500% inclusive of VAT, once off, deducted prior to the investment being made.

Annual Service Fee  .  %

Maximum 3.000% p.a. plus VAT, of the investment portfolio, calculated daily, charged and paid monthly in arrears

### • Old Mutual Balanced Fund Class

Admin Fee  .  %

Maximum 4.000% p.a. inclusive of VAT, deducted prior to the investment being made.

Annual Service Fee  .  %

Maximum 3.000% p.a. plus VAT, of the investment portfolio, calculated daily, charged and paid monthly in arrears

Authorised Signature 1

Date:  /  /

Authorised Signature 2

Date:  /  /

Authorised Signature 3

Date:  /  /

Authorised Signature 4

Date:  /  /

## SIGNATORIES ARRANGEMENTS

Either one to sign  Two to sign  All to sign

Signature of Agent/  
Broker/BDO

Date:  /  /

Name of Agent/Broker/BDO:  Code

Financial Advisor Licence No.:  VAT Vendor Status: Not Registered  Registered

VAT Number:

## FINANCIAL ADVISOR DECLARATION

1. I declare that I have made the disclosures required in terms of the Securities Act, 2010 and subordinate legislation thereto, to the Investor(s).
2. I warrant that I have explained all fees that relate to this investment to the investor.
3. I confirm that I have identified all parties to this transaction, where applicable, and verified his/her details under the requirements of the Financial Services Act and the Money Laundering Proceeds of Serious Crime and Terrorist Financing Act 2006 and its Regulations. **YES**  **NO**
4. I understand that if I have selected "No", the administrator will be responsible for the primary "Know your Investor" requirements in bullet 3 and that the application will be delayed until the administrator receives all the required "Know your Investor" documentation.

Financial Advisor Signature

Date:  /  /

## H. DECLARATION FROM INVESTOR

- I/We understand and agree to be bound by the provisions of this form. If on the date of signature of this application form an updated application form exists and the fees are different on that form the fees on the updated application form will apply.
- The information contained in this application is true and correct. Old Mutual Unit Trust Company (Malawi) Limited shall have the right to make any enquiries from any source to verify the information disclosed in this application form.
- Where this application form is signed in a representative capacity I/We have the necessary authority to sign.
- Old Mutual Unit Trust Company (Malawi) Limited reserves the right to request any additional evidence to identify the source or the investment amount prior to processing this application; and
- Any amounts received by Old Mutual Unit Trust Company (Malawi) Limited by debit order or Electronic Funds Transfer (EFT) will be deemed not to have been received and no transaction(s) in respect of such application may be made until the amount has been unconditionally credited to the Old Mutual Unit Trust Company (Malawi) Limited bank account.

I/We indemnify and hold Old Mutual Unit Trust Company (Malawi) Limited harmless against any claim of whatsoever nature which I/We may have resulting from conducting business by telephone, facsimile, email, website ,delegating to a 3RD party or any other electronic means. I/We hereby consent to Old Mutual Unit Trust Company (Malawi) Limited taking any security precautions it may deem necessary to proceed with my/our application. Old Mutual Unit Trust Company (Malawi) Limited shall at its discretion, have the option to pay or collect any amounts (provided that: I/We owe the amount to Old Mutual), via the Automated Clearing Bureau or EFT.

Authorised Signature 1		Authorised Signature 2	
Date:	D D / M M / C C Y Y	Date:	D D / M M / C C Y Y
Authorised Signature 3		Authorised Signature 4	
Date:	D D / M M / C C Y Y	Date:	D D / M M / C C Y Y

Name of Authorised Signature 1	
Capacity of authorised signatory	
Name of Authorised Signature 2	
Capacity of authorised signatory	
Name of Authorised Signature 3	
Capacity of authorised signatory	
Name of Authorised Signature 4	
Capacity of authorised signatory	

## I. MARKETING/RESEARCH CONSENT

As part of our service, companies in our group may provide you with information on products and services offered by them, that we believe will benefit you. In order to do this, these companies will need your contact details from us. Please let us know if this suits you. **YES**  **NO**

We sometimes tell our customers about other companies' products and services. We do so only if we believe that the information may be of interest to you. Your contact details remain confidential and are not given to these companies unless you indicate that you are interested in the offer. Please let us know if this suits you. **YES**  **NO**

We sometimes research our market to help us improve our products and services. The research companies we use follow strict codes of conduct and treat customers' information confidentially. Please let us know if you are willing to be contacted for research purposes. **YES**  **NO**

## FOR OFFICE USE ONLY

### BUSINESS DEVELOPER INFORMATION:

Initial and Surname of introducer

Branch

Tel. No.

Introducer's e-mail address

I declare that I have fully explained the Unit Trusts product and its implications to the Investor.

Signature of Agent/Broker/BDO

Date:

Application received by \_\_\_\_\_ Signature \_\_\_\_\_

Date received \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_: \_\_\_\_

Checked by \_\_\_\_\_ Signature \_\_\_\_\_

Date received \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_: \_\_\_\_

Account Number \_\_\_\_\_ Fund Class: \_\_\_\_\_

NB: \_\_\_\_\_

## FINANCIAL ADVISOR DECLARATION

1. I declare that I have made the disclosures required in terms of the Securities Act, 2010 and subordinate legislation thereto, to the Investor(s).
2. I warrant that I have explained all fees that relate to this investment to the investor.
3. I confirm that I have identified all parties to this transaction, where applicable, and verified his/her details under the requirements of the Financial Services Act and the Money Laundering Proceeds of Serious Crime and Terrorist Financing Act 2006 and its Regulations. **YES**  **NO**
4. I understand that if I have selected "No", the administrator will be responsible for the primary "Know your Investor" requirements in bullet 3 and that the application will be delayed until the administrator receives all the required "Know your Investor" documentation.

## IMPORTANT POINTS

1. Copies of all the documents submitted by the application should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities, authorised for (Commissioner for Oathes/Notary Public);
2. If any proof of identity or address is in a foreign language then translation to English will be required.
3. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
4. If correspondence & registered office addresses are different, then proofs for both have to be submitted.
5. A sole proprietor must provide both personal and trading names ( e.g. John Banda trading as Uniti Thirasiti Enterprises).

### BLANTYRE OFFICE:

Old Mutual Building,  
30 Glyn Jones Road,  
Blantyre.  
Tel: +265 1 820 677, Fax +265 1 822 649  
E-mail: unitrust@oldmutual.co.mw  
Website: www.oldmutual.co.mw

### LILONGWE OFFICE:

Old Mutual Building,  
Robert Mugabe Crescent,  
City Centre, Lilongwe.  
Tel: +265 1 773 425, Fax +265 1 771 075  
E-mail: unitrust@oldmutual.co.mw  
Website: www.oldmutual.co.mw

### MZUZU OFFICE:

Lutho Archade Building  
Orton Chirwa Avenue  
P.O. Box 266, Mzuzu  
Tel: +265 1 311 308, Fax +265 1 310 078  
E-mail: unitrust@oldmutual.co.mw  
Website: www.oldmutual.co.mw

All OMUTM Unit Trusts portfolios are valued and priced using forward pricing at 15h00 each business day. Unit Trusts prices are calculated on a net asset value basis by determining the total market value of all assets in the Unit Trusts portfolio scheme, including any income accruals, less any permissible deductions from the portfolio namely: brokerage fees, Value Added Tax, auditors' fees, bank charges, trustee and custodian fees, and the service charges of the manager. Units will be repurchased by the manager at the ruling price calculated in accordance with the requirements of the Act and the relevant deeds and paid to the investor only. Subject to occurrences beyond the control of OMUTM, transaction requests received by OMUTM before 9:30am for Money Market Funds and Balanced Funds will be actioned at that day's price.

**KYC DOCUMENTATION CHECKLIST**

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**Partnerships:**

- An original, a certified copy of the partnership agreement
- A certified copy of the minutes of a partnership meeting / resolution authorising the investment
- An original copy or certified copy of a certificate of registration of business name issued by a government or government agency in Malawi
- An original current membership certificate (or equivalent) of a professional association
- Audited financial statements of the partnership
- Authorised signatories list with specimen signatures
- Identification documents for all partners 
  - o National ID
  - o Passport
  - o Driving licence

**Death Claims**

- Death certificate
- Letters of Administration/Will

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**FOR OFFICE USE**

Application documents checked by: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Address:** Old Mutual Unit Trust Company (Malawi) Limited, Old Mutual Building, 30 Glyn Jones Road, Blantyre | P.O. Box 393, Blantyre, Malawi

**Telephone:** 265 (1) 820 677

**Email:** unittrust@oldmutual.co.mw

**Website:** www.oldmutual.co.mw

**Please print in block letters using black or blue ink. Tick blocks where applicable.**

## (I) GENERAL

The information provided remains valid for the duration of the investment

**OLD MUTUAL UNIT TRUSTS COMPANY (MALAWI) LIMITED** is authorised and supervised by the Registrar of Financial Institutions (see more information below)

### Agent/Intermediary/Broker Details

Name

Address

Telephone

E-mail

### Applicant's Contact Information

Name

Address

Telephone

E-mail

## (II) KEY TERMS

Review carefully before buying an investment

### A. INVESTMENT DETAILS

Type of Investment: UNIT TRUSTS

Charges or costs: INITIAL FEE AND ANNUAL SERVICE FEE ON INVESTMENT FUNDS

Consequences of termination of contract before maturity of investment: NONE

Replacement cost of investment documents: NONE

Tax implications on return: WITHHOLDING TAX AT RATE

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## **B. COST OF INVESTMENT PRODUCT AND SERVICE**

Minimum investment amount payable (Monthly/Quarterly/Lump sum)

- Initial investment amount - minimum K50 000
- Ad Hoc/Additional amounts - minimum K30 000 (Optional)

Benefits associated with the investment:

- Interest: Payable monthly for the Money Market Fund and semi annually for Balanced Fund
- Capital gains: For the Balanced Fund
- Basis of making investment decision: SAVINGS AND RETURNS

## **C. INVESTMENT SCHEDULE**

Duration: OPEN ENDED

Maturity Date: OPEN ENDED

Period to receive Welcome Letter after opening investment: 14 DAYS FROM DATE OF INVESTMENT

Are there any riders to this investment (clearly state the additional benefits on the investment) NONE

Exclusions: NONE

Penalties for termination of the policy prior to maturity: NONE

Conditions and costs of transferring ownership of investment: NOT APPLICABLE/NOT TRANSFERRABLE

## **D. STATUTORY RIGHTS**

Payment of investment benefits: Your investment benefits payment is expected to be made: 72 HOURS (3 business days) from the date of submitting redemption/withdrawal/disinvestment request

Customer Recourse: Complaints or comments? Please call 01 820 677, email:- unittrust@oldmutual.co.mw or write to The Client Services Manager, Old Mutual Malawi, P.O. Box 393, Blantyre

Redress Mechanism: In case of a dispute you may lodge a Complaint with the Registrar of Financial Institutions or file a lawsuit.

To contact the Registrar, call: 01 820299 or Toll Free: 80008444, email: complaints-handling@rbm.mw or write to: The Consumer Protection Unit, Reserve Bank of Malawi, P O Box 565, Blantyre, or Visit: <http://www.rbm.mw>

Right to Investment Documentation: You have the right to obtain a Welcome Letter of the proposed investment free of any charge.

## **E. DOCUMENTATION FOR INVESTMENT ACCOUNT OPENING**

Documents required:

As per KYC documentation checklist on page 8 of this application form

## F. AGREEMENT WITH INVESTOR

1. This application form and the deed will form the agreement between the investor and Old Mutual Unit Trust Company (Malawi) Limited (OMUTM) under the Securities Act no. 20 of 2010. This Deed is available for viewing at the registered office of Old Mutual.
2. Unit Trusts (UTs) are generally medium to long term investments. The value of the units may go down as well as up and past performance is not necessarily a guide to the future. UTs are traded at ruling prices. Commission and incentives may be paid and if so, would be included in the overall costs. Please refer to the fund summary at the back of this application form for a list of the initial fees and annual management fees applicable to each fund.
3. All Old Mutual Unit Trusts portfolios are valued and priced using forward pricing at 15h00 each business day.
4. Unit Trusts prices are calculated on a net asset value basis by determining the total market value of all assets in the Unit Trusts portfolio including any income accruals, less any deductions from the portfolio namely: brokerage fees, Value Added Tax, Auditors fees, Bank charges, Trustee and Custodian fees and the service charges of the manager. Please refer to the fund summary at the back of this application.
5. Units will be purchased by the manager at the ruling price calculated in accordance with the requirements of the Act and relevant deed and paid to the investor only. Subject to occurrences beyond the control of Old Mutual Unit Trusts Company (Malawi) Limited transaction requests received by Old Mutual Unit Trusts Company (Malawi) Limited before 11h00 for Money Market fund and 13h00 for Balanced Fund will be auctioned at that day's price. Monies from the repurchase of units will not be paid to third party bank accounts.
6. The manager may borrow up to 10% of the market value of the Unit Trusts Fund to ensure liquidity.
7. The fund(s) may engage in scrip- lending activities, subject to the limits and conditions imposed by the act.
8. OMUTM's Unit Trusts portfolios may at any stage be closed to enable the portfolios to be managed in accordance with their mandates.
9. If the investor requests a Unit Certificate, Old Mutual Unit Trust Company (Malawi) Limited reserves the right to re-purchase the units from the investor in order to pay for the stamp duty payable in respect of the units' certificate and the net number of units will be certified.
10. The clearance period on investments made by debit orders is 30 days.
11. Old Mutual Unit Trust Company (Malawi) Limited will only process instructions that are submitted on Old Mutual Unit Trust Company (Malawi) Limited standard transaction forms which are available at Old Mutual Unit Trust Company (Malawi) Limited premises.
12. Old Mutual Unit Trust Company (Malawi) Limited reserves the right to withhold processing of any unclear, incomplete or ambiguous requests forwarded by the investor. Old Mutual Unit Trust Company (Malawi) Limited will not be liable for any damages or loses of whatsoever nature arising out of Old Mutual Unit Trust Company (Malawi) Limited's failure to action this instruction due to occurrences beyond the control of Old Mutual Unit Trust Company (Malawi) Limited. Old Mutual Unit Trust Company (Malawi) Limited will not be liable for any loss incurred due to incorrect information being supplied by the investor. This includes but is not limited to Old Mutual Unit Trust Company (Malawi) Limited being unable to identify a deposit or transfer made to the bank account, for any reason whatsoever.
13. Proof of payment and receipts of all verification documentation requests must accompany this application form. Old Mutual Unit Trust Company (Malawi) Limited will not be obliged to process this application form until it has received proof of any payment and the verification documentation and Old Mutual Unit Trust Company (Malawi) limited will not be liable for any loss or damage arising from the inability of Old Mutual Unit Trust Company (Malawi) Limited to process this application form due to the fact that the requirements of the Securities Act have not been complied with. The investor indemnifies and holds Old Mutual Unit Trust Company (Malawi) limited harmless against any loss or damage which the investor may suffer as a result of any commission or omission by Old Mutual Unit Trust Company (Malawi) Limited which is a result of an obligation imposed on Old Mutual Unit Trust Company (Malawi) Limited by Securities Act.
14. RING FENCING:  
Ring fencing is the separation and delayed sale of units in a Portfolio. Large sale of units in a Portfolio above certain thresholds may cause ring- fencing. This ensures that the sale of a large number of units will not force Old Mutual Unit Trust Company (Malawi) Limited to sell the underlying investments at a price in the market which could have a negative impact on investors. Old Mutual Unit Trust Company (Malawi) Limited may delay the payment of reinvestments of the proceeds of the sale of units.
15. Old Mutual reserves the right to charge an exit fee. This will apply to both partial and total disinvestments." (EXIT FEE CLAUSE)
16. I agree that OMUTM may, if required by law, transfer my personal data to third party entities.
17. I agree that OMUTM may use my personal data for sanctions screening purposes.
18. OMUTM reserves the right to refuse to enter into or to terminate this business relationship at its discretion.
19. Client funds may be invested in related entities (including listed entities) at arms length.

CERTIFIED CORRECT:

Signature of investment provider representative

Date   /   /

I acknowledge that I receive and understand this statement prior to purchase of the investment

Signature of investor

Date   /   /

Signature of investor

Date   /   /

Signature of investor

Date   /   /

Signature of investor

Date   /   /

Signature of broker/agent (if applicable)

Date   /   /



# UNIT TRUSTS KEY FACTS STATEMENT CLIENT COPY

**Address:** Old Mutual Unit Trust Company (Malawi) Limited, Old Mutual Building, 30 Glyn Jones Road, Blantyre | P.O. Box 393, Blantyre, Malawi  
**Telephone:** 265 (1) 820 677  
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Please print in block letters using black or blue ink. Tick blocks where applicable.

## (I) GENERAL

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### Agent/Intermediary/Broker Details

Name

Address

Telephone

E-mail

### Applicant's Contact Information

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Address

Telephone

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Type of Investment: UNIT TRUSTS

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Consequences of termination of contract before maturity of investment: NONE

Replacement cost of investment documents: NONE

Tax implications on return: WITHHOLDING TAX AT RATE

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## **B. COST OF INVESTMENT PRODUCT AND SERVICE**

Minimum investment amount payable (Monthly/Quarterly/Lump sum)

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Benefits associated with the investment:

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Duration: OPEN ENDED

Maturity Date: OPEN ENDED

Period to receive Welcome Letter after opening investment: 14 DAYS FROM DATE OF INVESTMENT

Are there any riders to this investment (clearly state the additional benefits on the investment) NONE

Exclusions: NONE

Penalties for termination of the policy prior to maturity: NONE

Conditions and costs of transferring ownership of investment: NOT APPLICABLE/NOT TRANSFERRABLE

## **D. STATUTORY RIGHTS**

Payment of investment benefits: Your investment benefits payment is expected to be made: 72 HOURS (3 business days) from the date of submitting redemption/withdrawal/disinvestment request

Customer Recourse: Complaints or comments? Please call 01 820 677, email:- unittrust@oldmutual.co.mw or write to The Client Services Manager, Old Mutual Malawi, P.O. Box 393, Blantyre

Redress Mechanism: In case of a dispute you may lodge a Complaint with the Registrar of Financial Institutions or file a lawsuit.

To contact the Registrar, call: 01 820299 or Toll Free: 80008444, email: complaints-handling@rbm.mw or write to: The Consumer Protection Unit, Reserve Bank of Malawi, P O Box 565, Blantyre, or Visit: <http://www.rbm.mw>

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2. Unit Trusts (UTs) are generally medium to long term investments. The value of the units may go down as well as up and past performance is not necessarily a guide to the future. UTs are traded at ruling prices. Commission and incentives may be paid and if so, would be included in the overall costs. Please refer to the fund summary at the back of this application form for a list of the initial fees and annual management fees applicable to each fund.
3. All Old Mutual Unit Trusts portfolios are valued and priced using forward pricing at 15h00 each business day.
4. Unit Trusts prices are calculated on a net asset value basis by determining the total market value of all assets in the Unit Trusts portfolio including any income accruals, less any deductions from the portfolio namely: brokerage fees, Value Added Tax, Auditors fees, Bank charges, Trustee and Custodian fees and the service charges of the manager. Please refer to the fund summary at the back of this application.
5. Units will be purchased by the manager at the ruling price calculated in accordance with the requirements of the Act and relevant deed and paid to the investor only. Subject to occurrences beyond the control of Old Mutual Unit Trusts Company (Malawi) Limited transaction requests received by Old Mutual Unit Trusts Company (Malawi) Limited before 11h00 for Money Market fund and 13h00 for Balanced Fund will be auctioned at that day's price. Monies from the repurchase of units will not be paid to third party bank accounts.
6. The manager may borrow up to 10% of the market value of the Unit Trusts Fund to ensure liquidity.
7. The fund(s) may engage in scrip- lending activities, subject to the limits and conditions imposed by the act.
8. OMUTM's Unit Trusts portfolios may at any stage be closed to enable the portfolios to be managed in accordance with their mandates.
9. If the investor requests a Unit Certificate, Old Mutual Unit Trust Company (Malawi) Limited reserves the right to re-purchase the units from the investor in order to pay for the stamp duty payable in respect of the units' certificate and the net number of units will be certified.
10. The clearance period on investments made by debit orders is 30 days.
11. Old Mutual Unit Trust Company (Malawi) Limited will only process instructions that are submitted on Old Mutual Unit Trust Company (Malawi) Limited standard transaction forms which are available at Old Mutual Unit Trust Company (Malawi) Limited premises.
12. Old Mutual Unit Trust Company (Malawi) Limited reserves the right to withhold processing of any unclear, incomplete or ambiguous requests forwarded by the investor. Old Mutual Unit Trust Company (Malawi) Limited will not be liable for any damages or loses of whatsoever nature arising out of Old Mutual Unit Trust Company (Malawi) Limited's failure to action this instruction due to occurrences beyond the control of Old Mutual Unit Trust Company (Malawi) Limited. Old Mutual Unit Trust Company (Malawi) Limited will not be liable for any loss incurred due to incorrect information being supplied by the investor. This includes but is not limited to Old Mutual Unit Trust Company (Malawi) Limited being unable to identify a deposit or transfer made to the bank account, for any reason whatsoever.
13. Proof of payment and receipts of all verification documentation requests must accompany this application form. Old Mutual Unit Trust Company (Malawi) Limited will not be obliged to process this application form until it has received proof of any payment and the verification documentation and Old Mutual Unit Trust Company (Malawi) limited will not be liable for any loss or damage arising from the inability of Old Mutual Unit Trust Company (Malawi) Limited to process this application form due to the fact that the requirements of the Securities Act have not been complied with. The investor indemnifies and holds Old Mutual Unit Trust Company (Malawi) limited harmless against any loss or damage which the investor may suffer as a result of any commission or omission by Old Mutual Unit Trust Company (Malawi) Limited which is a result of an obligation imposed on Old Mutual Unit Trust Company (Malawi) Limited by Securities Act.
14. RING FENCING:  
Ring fencing is the separation and delayed sale of units in a Portfolio. Large sale of units in a Portfolio above certain thresholds may cause ring- fencing. This ensures that the sale of a large number of units will not force Old Mutual Unit Trust Company (Malawi) Limited to sell the underlying investments at a price in the market which could have a negative impact on investors. Old Mutual Unit Trust Company (Malawi) Limited may delay the payment of reinvestments of the proceeds of the sale of units.
15. Old Mutual reserves the right to charge an exit fee. This will apply to both partial and total disinvestments." (EXIT FEE CLAUSE)
16. I agree that OMUTM may, if required by law, transfer my personal data to third party entities.
17. I agree that OMUTM may use my personal data for sanctions screening purposes.
18. OMUTM reserves the right to refuse to enter into or to terminate this business relationship at its discretion.
19. Client funds may be invested in related entities (including listed entities) at arms length.

CERTIFIED CORRECT:

Signature of investment provider representative

Date   /   /

I acknowledge that I receive and understand this statement prior to purchase of the investment

Signature of investor

Date   /   /

Signature of investor

Date   /   /

Signature of investor

Date   /   /

Signature of investor

Date   /   /

Signature of broker/agent (if applicable)

Date   /   /