

# **FICA MANUAL**

**FUTURUM FINANCIAL GROUP (PTY) LTD**

**REG NO(1998/013952/07)**

**AND AFFILIATED COMPANIES**

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## **INTRODUCTION**

Money laundering is a term used to describe a number of techniques, procedures or processes in which funds obtained through illegal, unlawful or criminal activities are converted into assets in such a way so as to conceal their true origin, ownership or any other factors that may indicate an irregularity. The main objective of money laundering is to legitimise income originating from these sources. (*LAIS Anti-Money Laundering Guidance Notes For Insurance Supervisors and Insurance Entities, P4*)

The *Financial Intelligence Center Act* 38 of 2001 ("the Act" or "FICA") was promulgated specifically to deal with money laundering and this manual is drafted in terms of the requirements of the Act and regulations thereto. All employees of the company and its subsidiaries (referred to globally as "FFG" for ease of reference) are required to comply with the provisions of the Act and this manual sets out how to comply.

Extracts of the Act can be found in Annexure "B".

## A. **RESPONSIBLE PERSONS AND COMPLIANCE OFFICER**

The Compliance officers have been appointed to ensure that FICA and the internal rules are complied with. The responsible persons will report to the compliance officer.

The Compliance Officers are:

### **COMPLIANCE OFFICER**

**Anton Swanepoel**

anton@cruxconsulting.co.za

### **FICA COMPLIANCE OFFICERS**

- PRETORIA **Yolanda Cilliers**  
yolandac@ffgpta.co.za
- POTCHEFSTROOM **Wiekus Kemp**  
wiekus@ffghq.com
- KLERKSDORP **Annelize Pretorius**  
annelize@ffgkld.co.za

The unit managers have been appointed as the responsible or accountable person in a particular department, division or subsidiary. This person will have to ensure that each member of the department, division or subsidiary understands and applies the money laundering measures contained in this manual. [The responsible persons will report to the FICA Compliance Officer for the purposes of FICA compliance.](#)

The rules referred to in this manual are applicable to

- FINANCIAL ADVISORY SERVICES
- TAX DEPARTMENT
- EMPLOYEE BENEFITS

- SHARES and SAFEX
- INVESTMENT SERVICES
- BANK DEPARTMENT

The rules applicable to these respective business units listed below are included in Annexure "D" to this manual. It is the responsibility of each responsible person to ensure that internal rules are drafted for their respective areas (where necessary) and incorporated in the manual by 30<sup>th</sup> June 2003.

<u>Department / Division / Subsidiary</u>	<u>Responsible Person</u>
FINANCIAL ADVISORY – Klerksdorp	CHRISTO SMIT
FINANCIAL ADVISORY – Potchefstroom	H L KLOPPER
FINANCIAL ADVISORY – Pretoria	DIRK J VAN SCHALKWYK
EMPLOYEE BENEFITS – Potchefstroom	SUZIE VAN VUUREN
EMPLOYEE BENEFITS – Pretoria	DIRK J VAN SCHALKWYK
EMPLOYEE BENEFITS – Klerksdorp	CHRISTO SMIT
BANKING	SUZIE VAN VUUREN
SHARES and SAFEX	H L KLOPPER
INVESTMENT SERVICES	H L KLOPPER

## **B. DEFINITIONS**

When using this manual you will come across some terminology and this section sets out the meaning of the terminology.

**"accountable institution"** means all businesses or persons as listed in Schedule 1 to the Act and includes (but is not restricted to), all listed companies, all estate agents, all insurance companies, all insurance intermediaries and all unit trust management companies. All these aforementioned entities have certain obligations in terms of the Act and these are set out in this manual.

**"business relationship"** as opposed to a once-off transaction means a continuing arrangement between two or more parties at least one of whom is acting in the course and scope of business (typically the institution and a customer or client) where transactions are facilitated between the parties on a regular or habitual basis.

**"cash"** this includes not only the physical cash paid or received but also any traveller's cheques.

**"certified copy"** for the purposes of this manual means a true copy made from the original document and on which the FFG employee has verified as a copy of the original by signing his / her name in full and dating the copy.

**"FIC"** means the Financial Intelligence Centre, the government authority who ensures compliance with the Act and who FFG reports to in terms of the Act.

**"FICA Reporting Officer (FRO)"** means the person appointed to report transactions to the FIC has been appointed for FFG – see CLAUSE A.

**"KYC"** means Know your client.

**"FFG"** means either FUTURUM FINANCIAL GROUP (PTY) LTD or any or all of the companies forming part of the group either collectively or individually.

**"transaction / single transaction "** a transaction carried out other than in the normal course of business for one of the parties (see business relationship definition).

## C. THE RULES

The Act states that all accountable institutions when establishing a business relationship or concluding a transaction with a client must obtain and verify certain

information, maintain records of the relationship or transaction with that client, report cash transactions (received and paid) above a certain threshold and or report suspicious or unusual transactions.

This means that any business entity as specified in section B must follow the procedure set out in section D when dealing with a new client or business partner. A transaction may not be concluded without the information required in section D being supplied by the client or business partner. In addition, annexure D contains rules specific to certain business units, these must be applied together with the contents of the manual.

All verification of new clients must be done on a face to face basis, that is the client must be physically met and identified. The Act states that all the information required in section D for existing clients must be obtained within 1 year after the 30<sup>th</sup> June 2003, procedures will be developed for this in due course.

## **1 ESTABLISHMENT AND VERIFICATION OF IDENTITIES OF PARTIES TO A BUSINESS RELATIONSHIP OR SINGLE TRANSACTION (Section 21, Regulations 2 - 19)**

1.1 Where the business partner is the following type of entity, this step need not be followed unless the transaction is a suspicious, or unusual transaction:

1.1.1 Where the party to be transacted with is company listed on the JSE;

Where the business partner does not fulfil the above exemption, the following information must be obtained:

1.2 Natural person

(\*the generic Know Your Client (KYC) form attached in annexure "A1" can be completed as a record of this information where there is no specific KYC form

for the business unit. The KYC form in the Annexure A3 can be used for Life / Unit Trust business)

- 1.2.1 Full names and I.D. number together with certified copy of identity document or certified copy of a valid driver's licence (where the I.D. document is not available, a reason for no I.D. document must be supplied). The client or business partner must be physically identified and seen.
- 1.2.2 Residential address which must be substantiated by one of the following which must reflect the address, and a copy of the document must be kept:
- a utility bill (less than 3 months old)
  - a bank statement (less than 3 months old)
  - a recent lease agreement (less than 3 months old)
  - a rates and taxes account (less than 3 months old)
  - a Telkom telephone account (less than 3 months old)
  - a mortgage statement (less than 3 months old)
  - a SARS return / IRP5 (less than 3 months old)
  - a recent insurance policy document (less than 3 months old)
  - payslip or salary advice (less than 3 months old)
  - valid TV licence document (less than 3 months old)
  - recent motor vehicle licence document (less than 3 months old)
- 1.2.3 The tax reference number and a certified copy of a SARS document reflecting the details, if such a number has been issued to the client or business partner.
- 1.2.4 Natural persons under legal incapacity e.g. minors/ persons under curatorship
- The information in 1.2.1 and 1.2.2 must be obtained for both the incapacitated person and the person assisting.

### 1.3 Legal persons

#### 1.3.1 Close Corporations and companies

(\*The generic KYC form for legal persons attached in Annexure A2 can be completed as a record of the information required. Annexures A4 - A10 can be used for Life / Unit Trust business.)

1.3.1.1 The registered name, registration number and registered address of the entity together with a certified copy of the Certificate of Incorporation (company form CM1), Notice of Registered Office and postal address (form CM22). The forms must bear the stamp of the Registrar of Companies. For a Close Corporation, certified copies of the Funding Statement, Certificate of Incorporation (CK1), Amended Founding Statement (CK2) if applicable, all duly stamped are required;

1.3.1.2 The trade name of the business (if applicable) and proof of the trade name. Proof may be in a form as per clause 1.2.2;

1.3.1.3 The physical address of the business per clause 1.2.2. Where the business has multiple addresses from which it operates, the head office address and the relevant branch office address are required;

1.3.1.4 For a company, the following additional requirements must be met:

- (a) the full names, date of birth and residential address and contact particulars of the manager of the company and each natural person authorised to transact with FFG on behalf of the other company; and

(b) the full names, I.D. number and date of birth or registered name, registration number, registered address, trade name and business address of all persons/entities holding 25% or more of the voting rights of the company concerned.

(c) The manager or a director must be physically met and identified.

1.3.1.5 For a close corporation the information per 1.3.1.4 (a) for each member and each person to be authorised to transact with FFG is required;

1.3.1.6 The information required in 1.3.1.4 and 1.3.1.5 is to be verified per clauses 1.2.1, 1.2.2, 1.3.1.1 and 1.3.1.2;

1.3.1.7 The Income Tax number and VAT number of the Close Corporation and company and certified copy of a SARS document.

### 1.3.2 Partnerships

1.3.2.1 Requirements in paragraphs 1.2.1, 1.2.2, 1.2.3, must be obtained for each partner;

1.3.2.2 The details required in paragraphs 1.2.1 to 1.2.3 for every manager and person establishing the relationship on behalf of the partnership;

1.3.3.3 The business name of the partnership and business address of the partnership and proof thereof per clause 1.2.2;

### 1.3.3 Trusts

- 1.3.3.1 The name, trust number and a certified copy of the trust deed;
- 1.3.3.2 The address of the Master of the High Court where the trust is registered;
- 1.3.3.3 The Income Tax number of the trust and a certified copy of the SARS document;
- 1.3.3.4 The full names, date of birth, identity number, residential address and contact particulars of each natural person who is a trustee, beneficiary and who acts on behalf of the trust and proof thereof per clause 1.2.1 and 1.2.2;
- 1.3.3.5 The requirements per clauses 1.3.1.1, 1.3.1.2 and 1.3.1.3 of each legal person that is a trustee or beneficiary;
- 1.3.3.6 Certified copies of the Letter of Appointment of all trustees;
- 1.3.3.7 Particulars of how the beneficiaries of the trust are determined.

### 1.4 Where a person acts on the authority of another

- 1.4.1 All the details of that authorised person per clauses 1.2.1 - 1.2.3 in the case of a natural person or clauses 1.3.1 - 1.3.5 in the case of a company or close corporation are required in addition;

1.4.2 A certified copy of a Power of Attorney or Resolution or Court Order.

1.5 Foreign Entities

1.5.1 Natural Persons

The particulars referred to in clauses 1.2.1 to 1.2.3 must be obtained in respect of any natural person who is not a citizen of the Republic.

Where an identity number is not available the passport number may be used, with a certified copy of the passport being provided.

1.5.2 Legal Persons

The particulars referred in clause 1.2 and 1.3 and 1.4 are to be obtained. In addition the country of incorporation must be established and verified.

**2 RECORD KEEPING (Sections 22 - 26, Regulation 20)**

Records are to be kept of everything that was done with the client or business partner. This means that all copies of documentation, including but not limited to, letters, application forms, quotes, receipts, e-mails as well as the further details mentioned in this section are to be kept.

2.1 All records are to be kept for 5 years after the date of the last transaction.

2.2 All records must be updated within 3 days of receiving a change of details.

- 2.3 All changes of detail must be accompanied by proof thereof.
- 2.4 All parties to a business relationship must confirm, in writing, all their details once every two years.
- 2.5 A record of all transactions with that party must be kept .
- 2.6 The name of the FFG employee dealing with the party must be recorded as well as the name of the person obtaining and verifying the information required in paragraph 1 must be kept.
- 2.7 The nature of the relationship or transaction must be recorded and a record thereof kept.
- 2.8 The amount involved must be recorded a record kept thereof.
- 2.9 Where the records are kept with a third party, such as auditor, a record of the files with the third party must be kept. The FIC must be informed by the responsible person that records are kept with the third party and must provide the FIC with the particulars of the third party.

### 3 **ORIGIN OF THE FUNDS (Regulation 21)**

- 3.1 Proof of the origin of funds is required for purposes of building a client profile where a person poses a high risk of facilitating money laundering activities *or* to enable FFG to identify any possible money laundering and information. The following documentation is required:

3.1.1 Origin of funds i.e. source of the other party's income, for example:

- Salary
- A donation
- An inheritance

3.1.2 Proof of the origin of funds. Any substantiating documentation such as:

- a copy of a will
- investment maturity letter
- balance sheet
- income statement

3.1.3 the source of the funds which the other party intends to use in the course of the relationship.

- Income statement
- Balance sheet
- Bank statement

#### 4 **THRESHOLD AND CASH REPORTING (Section 28)**

- All transactions, irrespective of whether they are cash or not, with a value of more than R50 000 are to be reported to the FICA Reporting Officer for onward reporting to FIC whether the funds are paid or received by FFG;

- Reporting to the FICA Reporting Officer is to be done within 5 days of receipt of the information.
- All cash transactions, that is cash paid or received, are to be reported to the FICA Reporting Officer irrespective of the amount.

## 5 SUSPICIOUS OR UNUSUAL TRANSACTIONS (Section 29)

- All suspicious and or unusual transactions are to be reported irrespective of the size of the transaction.
- If you know or suspect that a transaction about which enquiries have been made is suspicious the transaction must be reported.
- Reporting to the **FICA Reporting Officer**, [or in the case where the Managing Director, any other Director or senior employee contravene\(s\) the FICA Act, then Reporting to the FINANCIAL INTELEGENCE CENTRE directly](#) is to be done within 5 days of the receipt of the information.
- The following non-exhaustive list will automatically give rise to a duty to report the transaction as suspicious or unusual:
  - Where the person knows or suspects that FFG is about to or has received the proceeds of any unlawful activity.
  - Where the money is received for no apparent business or lawful purpose.
  - Where the business is conducted in a manner so as to avoid a reporting duty in terms of these rules.
  - Where the transaction may involve a breach of exchange control regulations.
  - Where the funds received may be as a result of any tax evasion or attempted

evasion.

- An application for business outside the client's normal pattern of business.
- A delay in the provision of information to enable verification to be completed.
- Any transaction that is unnecessarily complex.
- Any transaction involving an undisclosed party.
- Early termination of a product, especially at a loss or where cash was tendered or the refund cheque is to a third party.
- A transfer of a benefit of a product to a third party.
- Attempts to use a third party cheque to make payment.
- An applicant for business shows no concern for the performance of a product but much concern for the cancellation / refund of the product.
- The client attempt to use cash in a transaction where the client has typically used cheques or other methods of payment.
- The applicant requests to make payment with foreign currency or by wire transfer from another country.
- The client provides fictitious information.
- The client purchases products beyond his apparent means.
- The client purchases a large policy / product and within a short time cancels / repurchases and requests the cash value returned in cash or payable to a third party.
- The client uses a mailing address in another jurisdiction and the telephone has been disconnected when phoned for verification.

Any employees, agents or brokers who suddenly show a lavish lifestyle; an unexpected and dramatic increase sales; exceed a high level of single premium business or use their own business address as the delivery address for a client's documentation.

- When reporting the transaction to the FICA Reporting Officer the following

information is to accompany the report:

- the report must be marked for the attention of **HENK KLOPPERS**
  - the grounds for the suspicion that the transaction is suspicious or unusual
  - full client particulars as per clause D (1)
  - the forms included in Annexure "C" to the manual are to be completed in full prior to submission.
- The Act states that a person ought reasonably to have known or suspected a fact if the conclusions that the person ought to have reached would in fact have been reached by a reasonably diligent and vigilant person, having regard to the person's general knowledge, skill, training and experience that a person can be expected to have and that a person actually has.

## 6 REPORTING TO THE FIC

- All threshold transactions and cash transactions are to be reported to the FICA Reporting Officer, 2 EVANS AVE POTCHEFSTROOM, within 5 days of the transaction or suspicion arising.
- All suspicious and unusual transactions are to be reported to the FICA Reporting Officer as follows:
  - by completion in full of the Suspicious or Unusual Transaction Report forms found in Annexure "C"
  - attaching all supporting documentation to the forms
  - sending the forms and supporting documentation via internal mail to the FICA Reporting Officer ([wessie.van.der.westhuizen@za.pwc.com](mailto:wessie.van.der.westhuizen@za.pwc.com))
  - any incomplete forms will be returned
- If the reporter wishes to remain anonymous he or she may do so but is to provide the name of department on the reporting forms so that queries may be addressed.

- Once the transaction has been reported the transaction may be continued.
- Where a transaction has been reported you may continue with the transaction unless the relevant compliance officer or the FIC directs you otherwise.
- The FICA Reporting Officer is to acknowledge receipt of any reports made to it, save where the report was made anonymously.
- The FICA Reporting Officer has to report to the FIC within 15 days of the date of the transaction.
- The FIC will acknowledge receipt of the report once the FICA Reporting Officer has forwarded it to the FIC.
- The FIC may examine and request extracts from the records to be kept by the accountable institution and all such requests are to be referred to the FICA Reporting Officer. (a warrant may be required in certain instances).
- All queries by the FIC are to be referred to the FICA Reporting Officer.

## **7 CONFIDENTIAL INFORMATION**

- Any person who is required to make a report in terms of these rules may not disclose the fact that a report is being made or the contents of that report to any person other than the FICA Reporting Officer who is responsible for making the report to the FIC.
- The client or other business party may under no circumstances be informed that a report is to be made or that the client or business partner is suspected of money laundering.
- No person who is aware that a report is to be made may disclose that fact or any information contained in the report to any other person.

- Any person who *suspects* that a report is to be made or has been made is not to disclose that fact.
- If you make a report in good faith no criminal or civil action may be taken against you for reporting.
- If you make a report in good faith the company will not take any action against you.
- You will be a competent but not a compellable witness in any trial that may be held as a result of the report.

#### 8. **FOREIGN (OFFSHORE) FUNDS**

- Any person intending to convey cash (in excess of the prescribed amount) in or out of the Republic must report this without delay to the FICA Reporting Officer.
- Any EFT's (in excess of the prescribed amount) in or out of the Republic must be reported without delay to the FICA Reporting Officer.

#### 9. **DISCIPLINARY PROCEDURES**

- Any contravention of the rules contained in this manual or of the FIC Act will be dealt with in accordance the disciplinary procedures as set out in FFG's Human Resources Manual.
- Any contravention of the rules contained in this manual or the FIC Act may be a dismissable offence.
- Any person convicted of an offence in terms of FICA may be liable to imprisonment for a period of not more than 15 years or a fine of not more than R10 000 000.

**ANNEXURE "A1"**

**GENERIC KNOW YOUR CLIENT FORM (Natural Persons)**

1. Full Names:
  
2. Contact telephone number:
  
3. Occupation:
  
4. Date of Birth:
  
5. Identity Number:
  
6. Income Tax Registration Number:
  
7. Residential Address:
  
8. Postal Address:
  
9. Bank Account Details:

10. Nature of transaction:

**Documentation to be attached:**

- Certified copy of ID document.
- Certified copy of document confirming residential address.
- Certified copy of SARS document (if applicable).
- Certified copy(ies) of proof of origin of funds (if applicable).

*Please note that if the client or business partner is a minor or person without legal capacity all the guardian / curator / parent's details must be supplied as per the above as well as the client or business partner's details. Where a person acts on behalf of the client or business partner proof of the authority must be attached together with the details as required above for the client and person authorised to act.*

**Declaration by client / business partner**

I declare and warrant that:

- the information supplied above is correct.
- the funds to be used in the transaction do not constitute the proceeds of unlawful activity, including but not limited to tax evasion and breach of exchange control regulations.
- I am aware that certain Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.
- I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on the \_\_\_\_ day of \_\_\_\_\_ 20\_\_

Prospective client (full names and signature)

### 1.1 FFG Employee Declaration

I declare that:

- I am aware of the risks involved in being associated with the proceeds of unlawful activity and the reporting obligations contained in the Financial Intelligence Centre Act and the Prevention of Organised Crime Act.
- I have known the prospective client / business partner for .....(specify time period)
- I have no reason to suspect that the information supplied by the prospective client / business partner above is incorrect [delete if not applicable].
- I suspect that the information supplied by the prospective client / business partner is incorrect for the following reasons:  
 .....  
 [delete if not applicable]/[specify]
- I have received adequate training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the internal money laundering rules formulated by FFG (if applicable).
- The submission (or non-submission) of this document does not relieve me of the reporting obligations contained in the respective Acts.
- I have advised the client / business partner to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_ day of \_\_\_\_\_ 20\_\_

FFG Employee (full names and signature).

Designation: (e.g. senior clerk, divisional manager)



14. Company Address [Branch]:

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15. Company Address [Head Office]:

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16. Company Income Tax Registration Number:

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17. Company Vat Registration Number:

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18. Name of shareholder with more than 25% of the voting rights:

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The following information in respect of the manager of the company, each natural person representing the company and any shareholder owning more than 25% of the voting rights.

[If any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

1. Full Names:

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2. Capacity [manager, representative or shareholder]:

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3. Contact telephone number:

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4. Identity number:

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5. Date of Birth

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6. Residential Address:

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**Verification Documentation:**

Copies of the following documents to be attached:

1. Certificate of Incorporation [Form CM 1]: Stamped by Registrar of Companies and Signed by Company Secretary.
2. Notice of Registered Office and Postal Address [Form CM 22]. Stamped by Registrar of Companies and Signed by Company Secretary.
3. Document verifying Trading Name and Business Address.
4. SARS document containing the company name and income tax registration number.
5. SARS document containing the company name and vat registration number.
6. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
7. Written authorisation to act on behalf of the company.

The following information in respect of the manager, company representative and 25% shareholder.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

1. A South African Identity Document or New Drivers License or South African Passport.
2. Document verifying residential address [not older than three months]:  
Salary Advice Slip, Telkom Telephone Account or Bank Statement.

2.1.1 Company Representative Declaration:

I declare and warrant that:

1. the information supplied above is correct.

2. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
3. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
  - a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other(specify):  
\_\_\_\_\_
4. the reason for investing in the proposed policy is (specify):  
\_\_\_\_\_  
\_\_\_\_\_
5. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.
6. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Company Representative [full names, designation and signature]

## 2.2 FFG Employee Declaration:

I declare that:

1. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA Rules [if applicable].
2. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

3. I have known the company representative, for [specify time period]\_\_\_\_\_
4. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].
5. I suspect that the information supplied above is incorrect for the following reasons:  
 [delete if not applicable] [specify]  
 \_\_\_\_\_  
 \_\_\_\_\_
6. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA rules [if applicable].
7. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].
8. I have advised the company representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_

Financial Advisor (full names and signature).

\_\_\_\_\_

Designation: (FFG Agent, Independent Financial Advisor or Other)

### 3 **GENERIC KNOW YOUR CLIENT FORM (TRUSTS)**

If the prospective client / business partner requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective client / business partner. If the prospective client / business partner is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective client / business partner.

Please note that the fact that the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve the reporter of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a trust the relevant Client Identification and Source of Funds Document must be used.**

19. Trust name:

---

20. Trust Number:

---

21. Address of the Master of the of the High Court [where trust is registered]:

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22. Income Tax Registration Number of trust:

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23. Particulars of how the beneficiaries of the trust are determined [refer to the trust deed]:

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The following information in respect of the founder, each trustee, each beneficiary mentioned by name in the trust deed and each natural person representing the trust [if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

6. Full Names:

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7. Capacity [founder, trustee, beneficiary, trust representative]:

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8. Contact telephone number:

---

9. Identity Number:

---

10. Date of Birth:

---

11. Residential Address:

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**Verification Documentation:**

Copies of the following documents to be attached:

8. Letters of authority from the master.

9. Trust deed or founding document [will]

10. SARS document containing the name and income tax number of the trust.

11. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
12. Written authorisation to act on behalf of the trust.

The following information in respect of the founder, each trustee, each beneficiary mentioned by name in the trust deed and each natural person representing the trust [if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

3. A South African Identity Document or New Drivers License or South African Passport.
4. Document verifying residential address [not older than three months]:  
Salary Advice Slip, Telkom Telephone Account or Bank Statement.

#### 3.1.1 Trust Representative Declaration:

I declare and warrant that:

7. the information supplied above is correct.
8. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
9. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
  - a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other (specify):

- 
10. the reason for investing in the proposed policy is (specify):
- 

- 
11. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

12. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_  
20\_\_\_\_\_

\_\_\_\_\_  
Trust Representative [full names, designation and signature]

### 3.2 FFG Employee Declaration:

I declare that:

9. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA Rules [if applicable].

10. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

11. I have known the trust representative, for [specify time period]\_\_\_\_\_

12. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].

13. I suspect that the information supplied above is incorrect for the following reasons: [delete if not applicable] [specify]  
\_\_\_\_\_

14. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA rules [if applicable].

15. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Internal FICA rules [if applicable].

16. I have advised the trust representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Financial Advisor (full names and signature).

\_\_\_\_\_

\_\_\_\_\_

Designation: (FFG REPRESENTATIVE/KEYPERSON)

#### **4 GENERIC KNOW YOUR CLIENT FORM (CLOSE CORPORATIONS)**

If the prospective client / business partner requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective client / business partner. If the prospective client / business partner is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective client / business partner.

Please note that the fact that the submission of this document does not relieve the FFG Employee of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering.

#### **Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a CC the relevant Client Identification and Source of Funds Document must be used.**

24. Registered CC Name:

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25. CC Registration Number:

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26. CC Trading Name:

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27. CC Address [Branch]:

\_\_\_\_\_  
\_\_\_\_\_

28. CC Address [Head Office]:

\_\_\_\_\_  
\_\_\_\_\_

29. CC Tax Registration Number:

\_\_\_\_\_  
\_\_\_\_\_

30. CC Vat Registration Number:

\_\_\_\_\_  
\_\_\_\_\_

The following information in respect of each member of the CC and each natural person representing the CC.

[If any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

12. Full Names:

\_\_\_\_\_  
\_\_\_\_\_

13. Capacity [member or representative]:

\_\_\_\_\_  
\_\_\_\_\_

14. Contact telephone number:

\_\_\_\_\_  
\_\_\_\_\_

15. Identity Number:

\_\_\_\_\_  
\_\_\_\_\_

16. Date of Birth:

\_\_\_\_\_  
\_\_\_\_\_

17. Residential

Address:

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**Verification Documentation:**

Copies of the following documents to be attached:

13. Founding Statement and Certificate of Incorporation [Form CK 1]  
 Stamped by the Registrar of CC and signed by a member of the CC
14. Amended Founding Statement [Form CK2] [If applicable]  
 Stamped by the Registrar of CC and signed by a member of the CC
15. Document verifying Trading Name and Business Address.
16. SARS document containing the CC name and income tax registration number.
17. SARS document containing the CC name and vat registration number.
18. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
19. Written authorisation to act on behalf of the CC.

The following information in respect of each member of the CC and each natural person  
 representing the CC.

[if any of the aforementioned are foreign nationals, companies, close corporations,  
 partnerships or trusts please refer to the FICA regulations for the information required].

5. A South African Identity Document or New Drivers License or South African Passport.
6. Document verifying residential address [not older than three months]:  
 Salary Advice Slip, Telkom Telephone Account or Bank Statement.

## 4.1.1 CC Representative Declaration:

I declare and warrant that:

13. the information supplied above is correct.

14. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.

15. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:

- a gift or inheritance
- disposal of property or other assets
- liquidation of an existing investment portfolio
- other

(specify):

\_\_\_\_\_

\_\_\_\_\_

16. the reason for investing in the proposed policy is (specify):

\_\_\_\_\_

\_\_\_\_\_

17. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

18. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CC Representative [full names, designation and signature]

4.2 FFG Employee Declaration:

I declare that:

17. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA Rules [if applicable].

- 18. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.
- 19. I have known the CC representative, for [specify time period]\_\_\_\_\_
- 20. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].
- 21. I suspect that the information supplied above is incorrect for the following reasons:  
[delete if not applicable] [specify]  
\_\_\_\_\_  
\_\_\_\_\_
- 22. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA rules [if applicable].
- 23. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Internal FICA rules [if applicable].
- 24. I have advised the CC representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Financial Advisor (full names and signature).

\_\_\_\_\_  
Designation: (FFG REPRESENTATIVE/KEYPERSON)

**GENERIC KNOW YOUR CLIENT FORM (Foreign Companies)**

If the prospective client / business partner requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective client / business partner. If the prospective client / business partner is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective client / business partner.

Please note that the fact that FFG does not insist on the submission of this document does not relieve FFG Employees of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve FFG Employees of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a foreign company the relevant Client Identification and Source of Funds Document must be used.**

31. Company Name:

\_\_\_\_\_

\_\_\_\_\_

32. Company Number:

\_\_\_\_\_

\_\_\_\_\_

33. Registered Company Address:

\_\_\_\_\_

\_\_\_\_\_

34. Head Office Address:

\_\_\_\_\_

\_\_\_\_\_

35. South Africa  
Address: \_\_\_\_\_

\_\_\_\_\_

36. Branch Address:

\_\_\_\_\_

\_\_\_\_\_

37. Company Trading Name [Country of Incorporation]:

\_\_\_\_\_

38. Company Trading Name [South Africa]:

\_\_\_\_\_

39. Company Income Tax Registration Number:

\_\_\_\_\_

40. Company Vat Registration Number:

\_\_\_\_\_

\_\_\_\_\_

41. Name of shareholder with more than 25% of the voting rights:

\_\_\_\_\_

The following information in respect of the manager of the company [in respect of South African Affairs], each natural person representing the foreign company and any shareholder owning more than 25% of the voting rights.

[If any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

18. Full Names:

\_\_\_\_\_

\_\_\_\_\_

19. Capacity [manager, representative or shareholder]:

\_\_\_\_\_

20. Contact telephone number:

\_\_\_\_\_

21. Identity Number:

\_\_\_\_\_

22. Date of Birth:

\_\_\_\_\_

23. Residential Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Verification Documentation:**

Copies of the following documents to be attached:

20. Official incorporation document containing company name, registration number and registered address.
21. Document verifying Trading Name and Business Address.
22. SARS document containing the company name and income tax registration number.
23. SARS document containing the company name and vat registration number.
24. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
25. Written authorisation to act on behalf of the company.

The following information in respect of the manager, company representative and 25% shareholder.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

7. A South African Identity Document or New Drivers License or South African Passport.
8. Document verifying residential address [not older than three months]:  
Salary Advice Slip, Telkom Telephone Account or Bank Statement.

#### 4.2.1 Foreign Company Representative Declaration:

I declare and warrant that:

19. the information supplied above is correct.
20. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
21. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
  - a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other (specify):

---



---

22. the reason for investing in the proposed policy is (specify):

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---

23. I am aware that FFG Employees and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

24. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

---



---

Company Representative [full names, designation and signature]

#### 4.3 FFG Employee Declaration:

I declare that:

25. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA Rules [if applicable].
26. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.
27. I have known the company representative, for [specify time period]\_\_\_\_\_
28. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].
29. I suspect that the information supplied above is incorrect for the following reasons:  
[delete if not applicable] [specify]  
\_\_\_\_\_  
\_\_\_\_\_
30. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Internal FICA rules [if applicable].
31. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Internal FICA rules [if applicable].
32. I have advised the company representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
FFG Employee (full names and signature).

\_\_\_\_\_  
Designation: (FFG REPRESENTATIVE/KEYPERSON)



### ANNEXURE A3

#### KNOW YOUR CLIENT FORM - LIFE BUSINESS (Natural Persons)

#### **5 LONG-TERM INSURANCE POLICIES: NATURAL PERSONS: SOUTH AFRICAN CITIZENS AND RESIDENTS]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 3, 4, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

1. The prospective policy is a single premium policy not exceeding R50 000 subject to:
  - This document must be submitted if the policy is surrendered within three years of commencement.
  - This document must be submitted if a loan is granted against security of the policy within three years of commencement.
  - This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
  - This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.
2. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:
  - This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
  - This document must be submitted if the policy is surrendered within three years of commencement.

- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
3. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
  4. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
  5. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
  6. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a natural person the relevant Client Identification and Source of Funds Document must be used.

42. Proposal number:

\_\_\_\_\_

\_\_\_\_\_

43. Full Names:

\_\_\_\_\_

\_\_\_\_\_

44. Capacity [prospective policyholder, agent, principle, curator, guardian]:

\_\_\_\_\_

45. Contact telephone number:

\_\_\_\_\_

\_\_\_\_\_

46. Identity Number:

\_\_\_\_\_

\_\_\_\_\_

47. Date of Birth:

\_\_\_\_\_

\_\_\_\_\_

48. Income Tax Registration Number:

\_\_\_\_\_

\_\_\_\_\_

49. Residential Address:

\_\_\_\_\_

\_\_\_\_\_

**Verification Documentation:**

**Copies of the following documents to be attached:**

26. A South African Identity Document or New Drivers License or South African Passport.

27. SARS Document containing the name and income tax number of the involved party.
28. Document verifying residential address [not older than three months]:  
Salary Advice Slip, Telkom Telephone Account or Bank Statement.
29. Written authority if the prospective policyholder(s) is acting on behalf of another person(s) or is another person(s) is acting on behalf of the prospective policyholder(s).
30. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.

## 5.1.1

## 5.1.2 Prospective Policyholder [Involved Party] Declaration:

I declare and warrant that:

25. the information supplied above is correct.
26. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
27. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
  - a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other (specify):

---



---

28. the reason for investing in the proposed policy is (specify):

---



---

29. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.
30. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of  
 \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 Prospective policyholder [involved party] [full names and signature]

5.2 Financial Advisor Declaration:

I declare that:

33. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].

34. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

35. I have known the prospective policyholder for [specify time period]\_\_\_\_\_

36. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].

37. I suspect that the information supplied above is incorrect for the following reasons: [delete if not applicable] [specify]  
 \_\_\_\_\_

\_\_\_\_\_  
 38. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].

39. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].

40. I have advised the prospective policyholder to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_

Financial Advisor (full names and signature).

\_\_\_\_\_

Designation: (FFG REPRESENTATIVE/KEYPERSON)

**FFG Life Administrator’s Declaration:**

I declare that:

1. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
2. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
3. I have read this document and am satisfied that the required information and documentation has been submitted.
4. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_

Administrator (full names and signature)

\_\_\_\_\_

**6 DESIGNATION (SPECIFY)**

**ANNEXURE "A4"**

**7 [LONG-TERM INSURANCE POLICIES: TRUSTS]**

**[If the trust is a trust created outside SA please refer to the FICA regulations for the information required]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 15, 16, 17 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

7. The prospective policy is a single premium policy not exceeding R50 000 subject to:
  - This document must be submitted if the policy is surrendered within three years of commencement.
  - This document must be submitted if a loan is granted against security of the policy within three years of commencement.
  - This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
  - This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.
  
8. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:
  - This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
  - This document must be submitted if the policy is surrendered within three years of commencement.
  - This document must be submitted if a loan is granted against security of the policy within three years of commencement.

9. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
10. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
11. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
12. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a trust the relevant Client Identification and Source of Funds Document must be used.**

50. Policy number:

\_\_\_\_\_

\_\_\_\_\_

51. Trust name:

\_\_\_\_\_

\_\_\_\_\_

52. Trust Number:

\_\_\_\_\_

\_\_\_\_\_

53. Address of the Master of the of the High Court [where trust is registered]:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

54. Income Tax Registration Number of trust:

\_\_\_\_\_

55. Particulars of how the beneficiaries of the trust are determined [refer to the trust deed]:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The following information in respect of the founder, each trustee, each beneficiary mentioned by name in the trust deed and each natural person representing the trust [if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

24. Full \_\_\_\_\_ Names:

\_\_\_\_\_

25. Capacity [founder, trustee, beneficiary, trust representative]:

\_\_\_\_\_

26. Contact \_\_\_\_\_ telephone \_\_\_\_\_ number:

\_\_\_\_\_

27. Identity \_\_\_\_\_ Number:

\_\_\_\_\_

28. Date \_\_\_\_\_ of \_\_\_\_\_ Birth:

\_\_\_\_\_

29. Residential \_\_\_\_\_ Address:

\_\_\_\_\_

\_\_\_\_\_

**Verification Documentation:**

Copies of the following documents to be attached:

31. Letters of authority from the master.
32. Trust deed or founding document [will]
33. SARS document containing the name and income tax number of the trust.
34. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
35. Written authorisation to act on behalf of the trust.

The following information in respect of the founder, each trustee, each beneficiary mentioned by name in the trust deed and each natural person representing the trust [if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

9. A South African Identity Document or New Drivers License or South African Passport.
10. Document verifying residential address [not older than three months]:  
Salary Advice Slip, Telkom Telephone Account or Bank Statement.

7.1.1 Trust Representative Declaration:

I declare and warrant that:

31. the information supplied above is correct.
32. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
33. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
- a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other (specify):

\_\_\_\_\_

\_\_\_\_\_

34. the reason for investing in the proposed policy is (specify):

\_\_\_\_\_

\_\_\_\_\_

35. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.
36. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

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---

Trust Representative [full names, designation and signature]

7.2 Financial Advisor Declaration:

I declare that:

41. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].
42. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.
43. I have known the trust representative, for [specify time period]\_\_\_\_\_
44. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].
45. I suspect that the information supplied above is incorrect for the following reasons: [delete if not applicable] [specify]  
\_\_\_\_\_

- 
46. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].
47. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].
48. I have advised the trust representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Financial Advisor (full names and signature).  
\_\_\_\_\_

\_\_\_\_\_  
Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator’s Declaration:**

I declare that:

- 5. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
- 6. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
- 7. I have read this document and am satisfied that the required information and documentation has been submitted.
- 8. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Administrator (full names and signature)  
\_\_\_\_\_

\_\_\_\_\_  
Designation (specify)

## **8 ANNEXURE "A5"**

### **9 [LONG-TERM INSURANCE POLICIES: CLOSE CORPORATIONS]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 7, 8, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

13. The prospective policy is a single premium policy not exceeding R50 000 subject to:

- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
- This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
- This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.

14. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:

- This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.

15. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
16. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
17. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
18. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a CC the relevant Client Identification and Source of Funds Document must be used.**

56. Policy number:

\_\_\_\_\_

\_\_\_\_\_

57. Registered CC Name:

\_\_\_\_\_

\_\_\_\_\_

58. CC Registration Number:

\_\_\_\_\_

\_\_\_\_\_

59. CC Trading Name:

\_\_\_\_\_

\_\_\_\_\_

60. CC Address [Branch]:

\_\_\_\_\_

\_\_\_\_\_

61. CC Address [Head Office]:

\_\_\_\_\_

\_\_\_\_\_

62. CC Tax Registration Number:

\_\_\_\_\_

\_\_\_\_\_

63. CC Vat Registration Number:

\_\_\_\_\_

\_\_\_\_\_

The following information in respect of each member of the CC and each natural person representing the CC.

[If any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

30. Full \_\_\_\_\_ Names:

\_\_\_\_\_

31. Capacity \_\_\_\_\_ [member \_\_\_\_\_ or \_\_\_\_\_ representative]:

\_\_\_\_\_

32. Contact \_\_\_\_\_ telephone \_\_\_\_\_ number:

\_\_\_\_\_

\_\_\_\_\_

33. Identity \_\_\_\_\_ Number:

\_\_\_\_\_

\_\_\_\_\_

34. Date \_\_\_\_\_ of \_\_\_\_\_ Birth:

\_\_\_\_\_

\_\_\_\_\_

35. Residential \_\_\_\_\_ Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Verification Documentation:**

Copies of the following documents to be attached:

36. Founding Statement and Certificate of Incorporation [Form CK 1]  
Stamped by the Registrar of CC and signed by a member of the CC
37. Amended Founding Statement [Form CK2] [If applicable]  
Stamped by the Registrar of CC and signed by a member of the CC
38. Document verifying Trading Name and Business Address.
39. SARS document containing the CC name and income tax registration number.
40. SARS document containing the CC name and vat registration number.
41. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.

42. Written authorisation to act on behalf of the CC.

The following information in respect of each member of the CC and each natural person representing the CC.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

11. A South African Identity Document or New Drivers License or South African Passport.

12. Document verifying residential address [not older than three months]:

Salary Advice Slip, Telkom Telephone Account or Bank Statement.

9.1.1 CC Representative Declaration:

I declare and warrant that:

37. the information supplied above is correct.

38. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.

39. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:

- a gift or inheritance
- disposal of property or other assets
- liquidation of an existing investment portfolio
- other

(specify):

---



---

40. the reason for investing in the proposed policy is (specify):

---



---

41. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

42. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
 CC Representative [full names, designation and signature]

9.2 Financial Advisor Declaration:

I declare that:

49. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].

50. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

51. I have known the CC representative, for [specify time period] \_\_\_\_\_

52. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].

53. I suspect that the information supplied above is incorrect for the following reasons:  
 [delete if not applicable] [specify]

\_\_\_\_\_  
 54. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].

55. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].

56. I have advised the CC representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Financial Advisor (full names and signature).

\_\_\_\_\_  
\_\_\_\_\_

Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator’s Declaration:**

I declare that:

- 9. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
- 10. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
- 11. I have read this document and am satisfied that the required information and documentation has been submitted.
- 12. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Administrator (full names and signature)

\_\_\_\_\_  
\_\_\_\_\_

Designation (specify)



## 10 ANNEXURE A6

### 11 [LONG-TERM INSURANCE POLICIES: COMPANIES]

**[If the company is a foreign company please refer to the FICA regulations for the information required]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 7, 8, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

19. The prospective policy is a single premium policy not exceeding R50 000 subject to:

- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
- This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
- This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.

20. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:

- This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.

21. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
22. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
23. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
24. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a company the relevant Client Identification and Source of Funds Document must be used.**

64. Policy \_\_\_\_\_ number:

\_\_\_\_\_

65. Registered \_\_\_\_\_ Company \_\_\_\_\_ Name:

\_\_\_\_\_

66. Company \_\_\_\_\_ Registration \_\_\_\_\_ Number:

\_\_\_\_\_

67. Company \_\_\_\_\_ Trading \_\_\_\_\_ Name:

\_\_\_\_\_

68. Company Address [Branch]:

\_\_\_\_\_

69. Company Address [Head Office]:

\_\_\_\_\_

70. Company \_\_\_\_\_ Income \_\_\_\_\_ Tax \_\_\_\_\_ Registration \_\_\_\_\_ Number:

\_\_\_\_\_

71. Company \_\_\_\_\_ Vat \_\_\_\_\_ Registration \_\_\_\_\_ Number:

\_\_\_\_\_

72. Name of shareholder with more than 25% of the voting rights:

\_\_\_\_\_

The following information in respect of the manager of the company, each natural person representing the company and any shareholder owning more than 25% of the voting rights.

[If any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

36. Full \_\_\_\_\_ Names:

\_\_\_\_\_

37. Capacity [manager, representative or shareholder]:

\_\_\_\_\_

38. Contact \_\_\_\_\_ telephone \_\_\_\_\_ number:

\_\_\_\_\_

\_\_\_\_\_

39. Identity \_\_\_\_\_ Number:

\_\_\_\_\_

\_\_\_\_\_

40. Date \_\_\_\_\_ of

Birth: \_\_\_\_\_

\_\_\_\_\_

41. Residential \_\_\_\_\_ Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Verification Documentation:**

Copies of the following documents to be attached:

43. Certificate of Incorporation [Form CM 1]: Stamped by Registrar of Companies and Signed by Company Secretary.
44. Notice of Registered Office and Postal Address [Form CM 22]. Stamped by Registrar of Companies and Signed by Company Secretary.
45. Document verifying Trading Name and Business Address.
46. SARS document containing the company name and income tax registration number.
47. SARS document containing the company name and vat registration number.
48. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
49. Written authorisation to act on behalf of the company.

The following information in respect of the manager, company representative and 25% shareholder.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

13. A South African Identity Document or New Drivers License or South African Passport.

14. Document verifying residential address [not older than three months]:

Salary Advice Slip, Telkom Telephone Account or Bank Statement.

#### 11.1.1 Company Representative Declaration:

I declare and warrant that:

43. the information supplied above is correct.

44. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.

45. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:

- a gift or inheritance
- disposal of property or other assets
- liquidation of an existing investment portfolio
- other

(specify):

---



---

46. the reason for investing in the proposed policy is (specify):

---



---

47. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

48. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 Company Representative [full names, designation and signature]

11.2 Financial Advisor Declaration:

I declare that:

57. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].

58. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

59. I have known the company representative, for [specify time period] \_\_\_\_\_

60. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].

61. I suspect that the information supplied above is incorrect for the following reasons:  
 [delete if not applicable] [specify]

\_\_\_\_\_  
 62. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].

63. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].

64. I have advised the company representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Financial Advisor (full names and signature).

\_\_\_\_\_  
\_\_\_\_\_

Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator’s Declaration:**

I declare that:

- 13. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
- 14. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
- 15. I have read this document and am satisfied that the required information and documentation has been submitted.
- 16. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Administrator (full names and signature)

\_\_\_\_\_  
\_\_\_\_\_

Designation (specify)



## **12 ANNEXURE "A7"**

### **13 [LONG-TERM INSURANCE POLICIES: FOREIGN COMPANIES]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 9, 10, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

25. The prospective policy is a single premium policy not exceeding R50 000 subject to:

- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
- This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
- This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.

26. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:

- This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.

27. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
28. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
29. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
30. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a foreign company the relevant Client Identification and Source of Funds Document must be used.**

73. Policy number:

\_\_\_\_\_

\_\_\_\_\_

74. Company Name:

\_\_\_\_\_

\_\_\_\_\_

75. Company Number:

\_\_\_\_\_

\_\_\_\_\_

76. Registered Company Address:

\_\_\_\_\_

\_\_\_\_\_

77. Head Office Address:

\_\_\_\_\_

\_\_\_\_\_

78. South Africa

Address: \_\_\_\_\_

\_\_\_\_\_

79. Branch Address:

\_\_\_\_\_

\_\_\_\_\_

80. Company Trading Name [Country of Incorporation]:

\_\_\_\_\_

81. Company Trading Name [South Africa]:

\_\_\_\_\_

82. Company Income Tax Registration Number:

\_\_\_\_\_



50. Official incorporation document containing company name, registration number and registered address.
51. Document verifying Trading Name and Business Address.
52. SARS document containing the company name and income tax registration number.
53. SARS document containing the company name and vat registration number.
54. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
55. Written authorisation to act on behalf of the company.

The following information in respect of the manager, company representative and 25% shareholder.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

15. A South African Identity Document or New Drivers License or South African Passport.
16. Document verifying residential address [not older than three months]:  
Salary Advice Slip, Telkom Telephone Account or Bank Statement.

#### 13.1.1 Foreign Company Representative Declaration:

I declare and warrant that:

49. the information supplied above is correct.
50. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
51. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
  - a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other (specify):

---

52. the reason for investing in the proposed policy is (specify):

---



---

53. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

54. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

---



---

Company Representative [full names, designation and signature]

13.2 Financial Advisor Declaration:

I declare that:

65. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].

66. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

67. I have known the company representative, for [specify time period] \_\_\_\_\_

68. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].

69. I suspect that the information supplied above is incorrect for the following reasons:  
 [delete if not applicable] [specify]

---



---

70. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].
71. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].
72. I have advised the company representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 Financial Advisor (full names and signature).

\_\_\_\_\_  
 Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator's Declaration:**

I declare that:

17. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
18. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
19. I have read this document and am satisfied that the required information and documentation has been submitted.
20. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

---

---

Administrator (full names and signature)

---

---

Designation (specify)

## **14 ANNEXURE "A8"**

### **15 [LONG-TERM INSURANCE POLICIES: FOREIGN NATIONALS: NOT RESIDENT OR CITIZEN OF SOUTH AFRICA]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 5, 6, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

31. The prospective policy is a single premium policy not exceeding R50 000 subject to:

- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
- This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
- This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.

32. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:

- This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.

33. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
34. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
35. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
36. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a foreign national the relevant Client Identification and Source of Funds Document must be used.

85. Proposal number:

\_\_\_\_\_

\_\_\_\_\_

86. Full Names:

\_\_\_\_\_

\_\_\_\_\_

87. Nationality:

\_\_\_\_\_

\_\_\_\_\_

88. Passport Number:

\_\_\_\_\_

\_\_\_\_\_

89. Capacity [prospective policyholder, agent, principle, curator, guardian]:

\_\_\_\_\_

90. Contact telephone number:

\_\_\_\_\_

\_\_\_\_\_

91. Identity Number:

\_\_\_\_\_

\_\_\_\_\_

92. Date of Birth:

\_\_\_\_\_

\_\_\_\_\_

93. Income Tax Registration Number [if applicable]:

\_\_\_\_\_

94. Residential

Address:

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---

**Verification Documentation:****Copies of the following documents to be attached:**

56. An Identity Document or Passport.
57. SARS Document containing the name and income tax number of the involved party.
58. Written authority if the prospective policyholder(s) is acting on behalf of another person(s) or is another person(s) is acting on behalf of the prospective policyholder(s).
59. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.

15.1.1

15.1.2 Prospective Policyholder [Involved Party] Declaration:

I declare and warrant that:

55. the information supplied above is correct.
56. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
57. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
- a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio
  - other (specify):

---



---

58. the reason for investing in the proposed policy is (specify):

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59. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.
60. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of  
 \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 Prospective policyholder [involved party] [full names and signature]

15.2 Financial Advisor Declaration:

I declare that:

73. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].
74. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.
75. I have known the prospective policyholder for [specify time period]\_\_\_\_\_
76. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].
77. I suspect that the information supplied above is incorrect for the following reasons:  
 [delete if not applicable] [specify]  
 \_\_\_\_\_  
 \_\_\_\_\_
78. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].

79. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].
80. I have no reason to believe that the foreign national does not have the legal capacity to establish a business relationship or conclude a single transaction with FFG Life.
81. I have advised the prospective policyholder to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 Financial Advisor (full names and signature).

\_\_\_\_\_  
 Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator's Declaration:**

I declare that:

21. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
22. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
23. I have read this document and am satisfied that the required information and documentation has been submitted.
24. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

---

---

Administrator (full names and signature)

---

---

Designation (specify)

## **16 ANNEXURE "A9"**

### **17 [LONG-TERM INSURANCE POLICIES: OTHER LEGAL PERSONS]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]

[Read with regulations 2, 11, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

37. The prospective policy is a single premium policy not exceeding R50 000 subject to:

- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
- This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
- This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.

38. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:

- This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.

39. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
40. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
41. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
42. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not an “other legal person” the relevant Client Identification and Source of Funds Document must be used.**

95. Policy \_\_\_\_\_ number:

\_\_\_\_\_

96. Name \_\_\_\_\_ of \_\_\_\_\_ Legal \_\_\_\_\_ Person:

\_\_\_\_\_

97. Address \_\_\_\_\_ of \_\_\_\_\_ Legal \_\_\_\_\_ Person:

\_\_\_\_\_

98. Legal \_\_\_\_\_ Form:

\_\_\_\_\_

99. Income Tax Registration Number [if applicable]:

\_\_\_\_\_

The following information in respect of each natural person representing the legal person.

[If any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

48. Full \_\_\_\_\_ Names:

\_\_\_\_\_

49. Contact \_\_\_\_\_ telephone \_\_\_\_\_ number:

\_\_\_\_\_

50. Identity Number:

\_\_\_\_\_

\_\_\_\_\_

51. Date of Birth:

\_\_\_\_\_

\_\_\_\_\_

52. Residential Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Verification Documentation:**

Copies of the following documents to be attached:

- 60. Constitution or other Founding Document.
- 61. Document verifying Trading Name and Business Address.
- 62. SARS document containing the company name and income tax registration number.
- 63. SARS document containing the company name and vat registration number.
- 64. Proof of origin of funds (if applicable). Refer to regulation 21 of the FICA.
- 65. Written authorisation to act on behalf of the company.

The following information in respect of each natural person representing the legal person.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

17. A South African Identity Document or New Drivers License or South African Passport.

18. Document verifying residential address [not older than three months]:

Salary Advice Slip, Telkom Telephone Account or Bank Statement.

17.1.1 Legal Person Representative Declaration:

I declare and warrant that:

- 61. the information supplied above is correct.
- 62. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.

63. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:

- a gift or inheritance
- disposal of property or other assets
- liquidation of an existing investment portfolio
- other

(specify):

\_\_\_\_\_

\_\_\_\_\_

64. the reason for investing in the proposed policy is (specify):

\_\_\_\_\_

\_\_\_\_\_

65. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

66. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Legal Person Representative [full names, designation and signature]

17.2 Financial Advisor Declaration:

I declare that:

- 82. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].
- 83. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.
- 84. I have known the legal person representative, for [specify time period]\_\_\_\_\_
- 85. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].
- 86. I suspect that the information supplied above is incorrect for the following reasons:  
[delete if not applicable] [specify]  
\_\_\_\_\_  
\_\_\_\_\_
- 87. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].
- 88. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].
- 89. I have advised the legal person representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Financial Advisor (full names and signature).

\_\_\_\_\_  
Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator's Declaration:**

I declare that:

25. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
26. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.
27. I have read this document and am satisfied that the required information and documentation has been submitted.
28. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_

Administrator (full names and signature)

\_\_\_\_\_

Designation (specify)

18

[

## **19 ANNEXURE "A10"**

### **20 [LONG-TERM INSURANCE POLICIES: PARTNERSHIPS OTHER THAN PROFESSIONAL PARTNERSHIPS]**

Sections 1, 21, 22 and 29 of the Financial Intelligence Centre Act 38 of 2001 [FICA]  
[Read with regulations 2, 13, 14, 17, 21, 23 and the Part 2 exemptions].

Version: 30 June 2003

**To be completed in full and submitted to FFG Life with the application form for Long-Term Insurance Policies. This document does not have to be submitted when:**

43. The prospective policy is a single premium policy not exceeding R50 000 subject to:

- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.
- This document must be submitted if the same policyholder purchases more than one policy within a 6-month period and the total premium exceeds R50 000.
- This document must be submitted if a single premium injection exceeding R50 000 is made or if the sum of single premium injections made within a 6-month period exceed R50 000.

44. The prospective policy is a recurring policy and the annual equivalent of the recurring premiums does not exceed R25 000 subject to:

- This document must be submitted when the premium is increased resulting in the annual equivalent exceeding R25 000.
- This document must be submitted if the policy is surrendered within three years of commencement.
- This document must be submitted if a loan is granted against security of the policy within three years of commencement.

45. The prospective policyholder is a pension fund, provident fund or retirement annuity fund and the policy being purchased is a fund or fund member policy as defined in the Long-Term Insurance Act.
46. The prospective policy is a compulsory annuity purchased in terms of the rules of a pension fund, provident fund or retirement annuity fund, approved in terms of the Income Tax Act 1962.
47. The prospective policy is an assistance policy as defined in the Long-Term Insurance Act.
48. The prospective policy is a Long-Term Insurance policy providing benefits only upon death, disability, sickness or injury of the life insured.

**Failure to submit the required documentation will result in the business not being processed and could result in criminal sanctions being imposed.**

If the prospective policyholder(s) requires legal assistance to conclude the contract this document must also be completed for the person assisting the prospective policyholder(s). If the prospective policyholder(s) is acting on behalf of another person(s) the relevant Client Identification and Source of Funds Document must be completed for all parties involved. The same procedure must be followed if another person(s) is acting on behalf of prospective policyholder(s).

Please note that the fact that FFG Life does not insist on the submission of this document does not relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering. Nor does the submission of this document relieve Financial Advisors of their obligations contained in the respective Acts and FFG Life Internal FICA Rules [if applicable] dealing with money laundering.

**Required Information:**

**If more than one person or entity is involved in the transaction this information and the verification documentation must be submitted in respect of each person or entity. If the other person or entity involved is not a partnership the relevant Client Identification and Source of Funds Document must be used.**

100. Policy Number:  
 \_\_\_\_\_  
 \_\_\_\_\_

101. Partnership Name:  
 \_\_\_\_\_  
 \_\_\_\_\_

The following information in respect of the person who exercises executive control over the partnership, every partner and every person representing the partnership. [if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

53. Full Names:  
 \_\_\_\_\_  
 \_\_\_\_\_

54. Capacity [executive, partner or representative]:  
 \_\_\_\_\_

55. Contact telephone number:  
 \_\_\_\_\_  
 \_\_\_\_\_

56. Identity Number:  
 \_\_\_\_\_  
 \_\_\_\_\_

57. Date of Birth:  
 \_\_\_\_\_  
 \_\_\_\_\_

58. Residential

Address:

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**Verification Documentation:**

Copies of the following documents to be attached:

66. Partnership Agreement.

The following information in respect of the executive, each partner and every person representing the partnership.

[if any of the aforementioned are foreign nationals, companies, close corporations, partnerships or trusts please refer to the FICA regulations for the information required].

19. A South African Identity Document or New Drivers License or South African Passport.

20. Document verifying residential address [not older than three months]:

Salary Advice Slip, Telkom Telephone Account or Bank Statement.

20.1.1 Partnership Representative Declaration:

I declare and warrant that:

67. the information supplied above is correct.
68. the funds to be invested in the proposed policy do not constitute the proceeds of unlawful activities, including but not limited to tax evasion and breach of exchange control regulations.
69. the origin of the funds to be invested in the proposed policy is [delete if not applicable]:
- a gift or inheritance
  - disposal of property or other assets
  - liquidation of an existing investment portfolio

- other (specify):

\_\_\_\_\_

\_\_\_\_\_

70. the reason for investing in the proposed policy is (specify):

\_\_\_\_\_

\_\_\_\_\_

71. I am aware that Financial Advisors and Insurance Companies are obligated by law to report money laundering suspicions and certain defined transactions to the Financial Intelligence Centre.

72. I have been advised to consult with an attorney should I require further clarification concerning this document.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Partnership Representative [full names, designation and signature]

20.2 Financial Advisor Declaration:

I declare that:

90. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules [if applicable].

91. I have viewed the originals of the attached documentation and confirm that they are true copies of the original.

92. I have known the partnership representative, for [specify time period]\_\_\_\_\_

93. I have no reason to suspect that the information supplied above is incorrect [delete if not applicable].

94. I suspect that the information supplied above is incorrect for the following reasons:  
 [delete if not applicable] [specify]

---

95. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA rules [if applicable].

96. The submission [or non-submission] of this document does not relieve me of the reporting obligations contained in the respective Acts or FFG Life Internal FICA rules [if applicable].

97. I have advised the partnership representative to consult with an attorney should further clarification regarding this document be required.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
 \_\_\_\_\_ 20 \_\_\_\_\_

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Financial Advisor (full names and signature).

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Designation: (FFG Life Agent, Independent Financial Advisor or Other)

**FFG Life Administrator's Declaration:**

I declare that:

29. I am aware of the risks involved in being associated with the proceeds of unlawful activities and my obligations contained in the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.

30. I have received training covering the Financial Intelligence Centre Act, the Prevention of Organised Crime Act and the FFG Life Internal FICA Rules.

31. I have read this document and am satisfied that the required information and documentation has been submitted.

32. I have applied my mind to the contents of this document considering my obligations referred to in point 1 of this declaration.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Administrator (full names and signature)

\_\_\_\_\_  
\_\_\_\_\_

Designation (specify)

**ANNEXURE "B"****EXTRACTS FROM THE FINANCIAL INTELLIGENCE CENTRE ACT 38 OF  
2001**

Extracts from FICA and the FICA Regulations dealing with Internal Rules

[To be read with the Guidance Notes for the Financial Services Sector]

**6 June 2003**

FINANCIAL                      INTELLIGENCE                      CENTRE                      ACT  
NO. 38 OF 2001

[ASSENTED TO 28 NOVEMBER, 2001]

[DATE OF COMMENCEMENT: 1 FEBRUARY 2002]

(Unless otherwise indicated)

*(English text signed by the President)*

**43. Training and monitoring of compliance.—**

An accountable institution must—

- (a) provide training to its employees to enable them to comply with the provisions of this Act and the internal rules applicable to them;
- (b) appoint a person with the responsibility to ensure compliance by—
  - (i) the employees of the accountable institution with the provisions of this Act and the internal rules applicable to them; and
  - (ii) the accountable institution with its obligations under this Act

(Date of commencement of [s. 43](#) to be proclaimed.)

**42. Formulation and implementation of internal rules.—**

(1) An accountable institution must formulate and implement internal rules concerning—

- (a) the establishment and verification of the identity of persons whom the institution must identify in terms of Part 1 of this Chapter;
  - (b) the information of which record must be kept in terms of Part 2 of this Chapter
  - (c) the manner in which and place at which such records must be kept;
  - (d) the steps to be taken to determine when a transaction is reportable to ensure the institution complies with its duties under this Act; and
  - (e) such other matters as may be prescribed
- (2)

Internal rules must comply with the prescribed requirements.

(3)

An accountable institution must make its internal rules available to each of its employees involved in transactions to which this Act applies.

(4)

An accountable institution must, on request, make a copy of its internal rules available to—

- (a) the Centre;
- (b) a supervisory body which performs regulatory or supervisory functions in respect of that accountable institution.

(Date of commencement of [s. 42](#) to be proclaimed.)

#### **61. Failure to formulate and implement internal rules.—**

An accountable institution that fails to—

- (a) formulate and implement internal rules in accordance with [section 42 \(1\)](#) and [\(2\)](#);
- (b) make the internal rules available to its employees in accordance with [section 42 \(3\)](#); or
- (c) make a copy of its internal rules available to the Centre or a supervisory body in terms of [section 42 \(4\)](#),

is guilty of an offence

(Date of commencement of [s. 61](#) to be proclaimed.)

**62. Failure to provide training or appoint compliance officer.**—An accountable institution that fails to—

- (a) provide training to its employees in accordance with [section 43 \(a\)](#); or  
 (b) appoint the person referred to in [section 43 \(b\)](#)  
 is guilty of an offence.

(Date of commencement of [s. 62](#) to be proclaimed.)

**68. Penalties.—**

- (1) A person convicted of an offence mentioned in this Chapter, other than an offence mentioned in [subsection \(2\)](#), is liable to imprisonment for a period not exceeding 15 years or to a fine not exceeding R10 000 000.

(Date of commencement of [sub-s. \(1\)](#): 3 February, 2003.)

- (2) A person convicted of an offence mentioned in [section 55](#), [61](#) or [62](#) is liable to imprisonment for a period not exceeding five years or to a fine not exceeding R1 000 000

(Date of commencement of [sub-s. \(2\)](#) to be proclaimed.)

**REGULATIONS**

[GNR.1595 of 20 December 2002](#)

Money laundering control regulations

GNR.1596 of 20 December 2002

Exemptions in terms of the Financial Intelligence Centre Act, 2001

CHAPTER 5

INTERNAL RULES

**25. Internal rules concerning establishment and verification of identities.**—The internal rules of an accountable institution concerning the establishment and verification of identities must—

- (a) provide for the necessary processes and working methods which will cause the required particulars concerning the identities of the parties to a business relationship or single transaction to be obtained on each occasion when a business relationship is established or a single transaction is concluded with the institution
- (b) provide for steps to be taken by the relevant staff members aimed at the verification of the required particulars concerning the identities of the parties to a business relationship or single transaction;
- (c) provide for the responsibility of the management of the institution in respect of compliance with the Act, these regulations and the internal rules;
- (d) allocate responsibilities and accountability to ensure that staff duties concerning the establishment and verification of identities are complied with;
- (e) provide for disciplinary steps against the relevant staff members for non-compliance with the Act, these regulations and the internal rules; and
- (f) take into account any guidance notes concerning the verification of identities which may apply to that institution.

**26. Internal rules concerning the keeping of records.**—The internal rules of an accountable institution concerning the keeping of records in terms of [section 22](#) of the Act must—

- (a) provide for the necessary processes and working methods to ensure that the relevant staff members of the institution obtain the information of which record must be kept on each occasion when a business relationship is established or a transaction is concluded with the institution;

- (b) provide for the responsibility of the management of the institution in respect of compliance with the Act, these regulations and the internal rules
- (c) allocate responsibilities and accountability to ensure that staff duties concerning the establishment and verification of identities are complied with
- (d) provide for disciplinary steps against the relevant staff members for non-compliance with the Act, these regulations and the internal rules
- (e) provide for the necessary processes and working methods to ensure that the accuracy and that the integrity of those records are maintained for the entire period for which they must be kept
- (f) provide for the necessary processes and working methods to ensure that access as may be required or authorised under the Act by the relevant staff members to those records can be obtained without undue hindrance; and
- (g) take into account any guidance notes concerning the verification of identities which may apply to that institution.

**27. Internal rules concerning reporting of information.**—The internal rules of an accountable institution concerning reporting of suspicious and unusual transactions must—

- (a) provide for the necessary processes and working methods which will cause suspicious and unusual transaction to be reported without undue delay;
- (b) provide for the necessary processes and working methods to enable staff to recognise potentially suspicious and unusual transactions or series of transactions;
- (c) provide for the responsibility of the management of the institution in respect of compliance with the Act, these regulations and the internal rules;
- (d) allocate responsibilities and accountability to ensure that staff duties concerning the reporting of suspicious and unusual transactions are complied with;
- (e) provide for disciplinary steps against the relevant staff members for non-compliance with the Act, these regulations and the internal rules; and
- (f) take into account any guidance notes concerning the reporting of suspicious or unusual transactions which may apply to that institution.

[Date of commencement of [Chapter 5](#): 30 June 2003.]

**28. Guidance notes.**—(1) The Centre may issue guidance notes concerning—

- (a) the verification of identities;
  - (b) reporting of suspicious and unusual transactions; and
  - (c) any other obligations imposed on accountable institutions under the Act.
- (2) Guidance notes referred to in [subregulation \(1\)](#) may differ for different accountable institutions or persons, or categories of accountable institutions or persons and different categories of transactions.

[Date of commencement of [r. 28](#): 30 June 2003.]

### **30. Title and commencement.—**

- (1) These regulations are called the Money Laundering Control Regulations
- (2) [Chapter 4](#) and [regulations 29 \(7\)](#) and [\(9\)](#) shall come into operation on 3 February 2003
- (3) [Regulation 1](#), Chapters 1, 2, 3, and 5 and [regulations 28](#) and [29 \(1\), \(2\), \(3\), \(4\), \(5\), \(6\)](#) and [\(8\)](#) shall come into operation on 30

## 20.3 ANNEXURE "D1"

20.4

### **FFG LIFE ACTUARIAL DEPARTMENT**

20.5 Business Unit FICA Internal Rules: June 2003

**FFG Life Actuarial [Valuations]**

**FFG Life Actuarial [Global and Structured Products]FFG Life Actuarial [Local Products]**

**FFG Life Actuarial [Services]**

**FFG Life Legal Services [Life]**

**To be read with the FFG Life Limited Generic FICA Internal Rules**

**Section 43 of the Financial Intelligence Centre Act 38 of 2001 [The Act]**

**Regulations 25, 26, 27 and 28**

**The draft guidance notes for the Financial Services Sector**

*It is recorded that the business units referred to above do not generally deal with, advise, establish business relationships or single transactions with clients of FFG Life. No employees within these departments will be fulfilling advice giving or intermediary services as defined in the Financial Advisory and Intermediary Services Act 37 of 2002.*

## **21 RULE 1**

**Mr. Angus Barker [Deputy General Manager]** is responsible for ensuring compliance with the Act and these internal rules within the business units referred to above. This will be exercised under the guidance of the FFG Life Limited FICA Compliance Officer referred to in the FFG Life Limited Generic FICA Internal Rules.

## **22 RULE 2**

Failing to comply with the provisions of the Act and these internal rules will result in disciplinary action and criminal sanction as set out in the FFG Life Limited Generic FICA Internal Rules:

## **23 RULE 3**

If, in exceptional circumstances, employees do establish a business relationship or conclude a single transaction with a client (or prospective client) of FFG Life Limited they must ensure that the correct client identification, verification and record keeping procedures are followed. The FFG Life Limited Generic FICA Internal Rules and the FFG Life Limited FICA Compliance Officer are to be consulted regarding the appropriate procedures, before establishing a business relationship or concluding a single transaction with a client (or prospective client) of FFG Life Limited.

### **23.1.1 Rule 4**

Reporting cash transactions is not the responsibility of the business units [or the employees working in these business units] listed above.

**24 RULE 5**

Suspicious or unusual transactions are to be reported within 5 working days of the suspicion arising. The reporting and record keeping requirements are set out in the FFG Life Limited Generic FICA Internal Rules. Reporting a suspicion would constitute a defence if charged with a contravention of the Act. Employees should therefore retain a copy of the report [and acknowledgement of receipt of the report by The FICA Reporting Officer] for a period of five years. Examples of suspicious or unusual transactions are included in FFG Life Limited Generic FICA Internal Rules.

**25 RULE 6**

The FICA Reporting Officer is obliged to acknowledge receipt of a report within 5 business days of the report being made. Receipt is to be acknowledged in writing utilising confidential mail services unless the employee reporting elects to remain anonymous and not receive confirmation.

**26 RULE 7**

No person making, or who must make a report, may disclose the fact that a report has been made or the contents of the report. The fact that a report has been made [or a suspicion that a report has been made], or the information contained in the report may not be disclosed to any other person, except as provided for in these rules and the Act.

**27 RULE 8**

Any request for information held by FFG Life relating to the Act is to be referred to FFG Life Limited FICA Compliance Officer, within 2 business days of receiving the request.

**28 RULE 9**

Staff should consult with The FFG Life Limited FICA Compliance Officer should they require further clarification of the internal rules or provisions of the Act.

**ANNEXURE "D2"**

**UNIT TRUST ADMINISTRATION**

**Unit Trusts – Internal controls and procedures to ensure Unit Holder Administration compliance.**

1. New Business

- (i) Application form matched with proof of deposit / copy of bank statement before processing
- (ii) Each day the 'new account report' is checked to application forms before sent to filing to ensure validity of account
- (iii) Nature of investment recorded for compliance with money laundering act
- (iv) Unusually large or frequent, cash investments reported to Internal Audit for compliance with money laundering act
- (v) Application form to have client signature before processing.
- (vi) Copy of client's identity document attached to the application form before processing - for compliance with SARS reporting 28/2 and Financial Intelligence Centre Act Where the ID document is not available an explanation must accompany the application form.
- (vii) A copy of the SARS document detailing the investor's tax number must be included.
- (viii) A copy of the investor's utility bill etc. must be received.
- (ix) Details regarding the origin of funds and proof thereof must be received.
- (x) Where an investment is made by a company, close corporation or trust the CM1, CM22, CK1, CK2 or trust deed and letter of appointment must be received together with the full details of the individual manager details, member details, trustee, beneficiary and person authorised to transact's details as the case may be.
- (xi) If a new account holder is not a natural person, a copy of the board resolution, trust agreement or Power of Attorney regarding authorisation to invest is requested
- (xii) Where a minor is investing full details and supporting documentation of all the guardians must accompany the application form.
- (xiii) Bank statement processing done daily and bank reconciliations performed

## ANNEXURE "D4"

### FFG LIFE EMPLOYEE BENEFITS DIVISION

#### 29 FICA REGULATIONS

##### A. Establishment and verification of identities

###### **Quotes process**

- a) The verification process:
  - a. The client will be verified only upon acceptance of the final quotation.
  - b. The quotation will be amended to state that the acceptance of this business is dependant upon verification of the client.
- b) The rule drafting application form will be amended to incorporate an identification checklist, which will also state that we are legally obliged to report suspicious transactions to the F.I.C. and that the business will only be accepted once the verification has been done.

##### 9.1 Sales process

Each time a consultant gets into a direct sale situation, it will be necessary for them to obtain and **verify** the required particulars of the parties with whom the business relationship is being entered into. It has been agreed that this only needs be done once the client has agreed that we can quote on the business.

The following information must be obtained:

1. The trade name and business address of the organization. This must be verified by obtaining a copy of any one of the following documents, which should be less than 3 months old and reflects the name and business

address of the organisation:

- (a) A utility bill
- (b) A bank statement
- (c) A rates and taxes invoice
- (d) A Telcom phone account

In addition, a recent rental agreement or SARS return could suffice.

2. The name, DOB and ID number of the **authorized** person being dealt with at the company also needs to be obtained and this must be verified by getting a copy of the ID document or passport or their drivers license. The residential address of this person also needs to be obtained and verified in the same manner as contained in point (1) above.

*The nature of business activity & origin of funds for investment needs to be established.*

25 d.: The Regional Manager (and in cases where the regional manager is also the consultant, the National Sales Manager) will be responsible for monitoring that this has been done, by ensuring the process has been signed off on the standard checklist and seeing that copies of the various documents are in fact obtained. These will be filed in the legal file together with the RDI. This file will be kept on the premises initially and then stored via metro filing.

## 9.2 Finance process

All outflow transactions require verification, a copy of the ID (if payment is made to an individual) or appropriate documentation as prescribed (if payment is not made to an individual) will be attached prior to submitting requisitions for payment. EB Finance will only perform payment transactions if the required documentation is attached.

### B. Keeping of Records

26 a - c. *See 25d above*

### 9.3 Finance process

All bank statements and supporting transaction allocation or benefit payment information will be kept for the required period to serve as record of all dealings and transactions with clients. These are of a paper nature and storage space will dictate the site, metro filing will be used if needed but most of the storage will be on the premises. Supporting documentation includes the electronic request for disinvestments and the like, these are printed.

All electronic data are being saved on the server in compliance with FAIS act.

Records will be kept for everything done relating to the client or business partner. All copies of documentation, including but not limited to, letters, application forms, quotes, receipts, e-mails as well as the further details are to be kept.

Records are updated within 3 days of receiving changed details and kept for 5 years, depending on office space either on the premises or with metro file.

With all annual scheme revisions, verification details will be called for again and updated within 3 days as above to ensure that records are up to date.

### C. Reporting of information

#### 9.4 27 a and b

#### 9.5 Finance process

1. Bank statements are scrutinized daily with the objective to allocate payments to clients. This process will include an awareness of potentially

suspicious transactions.

- a. Large cash deposits will show the related cash counting bank fee, these will be reported to Cindy Padgett.
  - b. Cash deposits followed by immediate withdrawals.
2. Receipt of cheques from a suspicious source will be reported to the forensic audit division.
    - a. Examples of these would be cheques from a company requesting the deposit into a retirement fund that has no obvious relation or interest in the fund in question.
  3. Any unusual requests (deposits or withdrawals) by individual members, brokers or participating employers will be reported in the same fashion.
  4. All cash transactions exceeding R50 000 will be reported to Cindy Padgett.
  5. All reporting to the forensic audit division will be done immediately by EB staff.

#### 9.6 Sales process

Should a consultant suspect anything untoward then there is a process in place to fill in the required form and forward it to Cindy Padgett who will take the required steps. The consultant will not be able to accept any contribution payment in cash and should this be offered, the consultant will be required to treat this as being a suspicious action.

##### **All of EB**

The suspicious transaction form will be given to all staff members and they will be guided through the process on joining. Having the document freely available will serve as a reminder to be aware of money laundering and suspicious transactions. Completed documents will be forward it to Cindy Padgett.

Reporting of suspicious transactions will follow the procedure as laid down by FFG Life Limited. Possible suspicious transactions are set out in the

addendum.

27 d. The responsibility rest with each staff member as required by the processes.

D. ALL

25 c, 26 e 27 c. Compliance will be managed as part of the normal audit and compliance procedures.

9.7 25e, 26d and 27 e

9.8 Disciplinary process

DISCIPLINARY STEPS FOLLOWED BY EB WILL BE IN LINE WITH THE PROCESS AS LAID DOWN BY THE HUMAN RESOURCES DIVISION OF FFG LIFE.

### **Addendum**

The following non-exhaustive list will give rise to a duty to report the transaction as suspicious or unusual :

- Where the person knows or suspects that FFG is about to or has received the proceeds of any unlawful activity.
- Where the money is received for no apparent business or lawful purpose.
- Where the business is conducted in a manner so as to avoid a reporting duty in terms of these rules.
- Where the funds received may be as a result of any tax evasion or attempted evasion.
- An application for business outside the client's normal pattern of business.
- A delay in the provision of information to enable verification to be completed.

- Any transaction that is unnecessarily complex.
  - Any transaction involving an undisclosed party.
  - Early termination of a product, especially at a loss or where cash was tendered or the refund cheque is to a third party.
  - A transfer of a benefit of a product to a third party.
  - Attempts to use a third party cheque to make payment.
  - An applicant for business shows no concern for the performance of a product but much concern for the cancellation / refund of the product.
  - The client attempt to use cash in a transaction where the client has typically used cheques or other methods of payment.
  - The applicant requests to make payment with foreign currency or by wire transfer from another country.
  - The client provides fictitious information.
  - The client purchases products beyond his apparent means.
  - The client purchases a large policy / product and within a short time cancels / repurchases and requests the cash value returned in cash or payable to a third party.
  - The client uses a mailing address in another jurisdiction and the telephone has been disconnected when phoned for verification.
- 
- ANY EMPLOYEES, AGENTS OR BROKERS WHO SUDDENLY SHOW A LAVISH LIFESTYLE; AN UNEXPECTED AND DRAMATIC INCREASE SALES; EXCEED A HIGH LEVEL OF SINGLE PREMIUM BUSINESS OR USE THEIR OWN BUSINESS ADDRESS AS THE DELIVERY ADDRESS FOR A CLIENT'S DOCUMENTATION.

### **30 ANNEXURE "D5"**

#### **31 FFG LIFE INDEPENDENT OPERATIONS**

Independent Operations (Indops) the life administration division of FFG Life Limited.

**1. Establishment and verification of identities.** (Produced in terms of Rule 25)

**Responsible persons and accountability** [S25 (c) and (d)]

Managers of accountable divisions will be appointed and listed in the Authorised Signatories Manual and will be responsible and accountable for compliance with The Act.

Compliance Officers appointed in Indops will be responsible and accountable for compliance with The Act.

Staff who are designated to deal with business that falls within The Act (see 1.2 following) are responsible and accountable for checking all life business transactions for compliance with The Act and referring these to the authorized manager for authorization.

**Business for which Indops is responsible.** This applies to over-the-threshold business only.

FFG Life will comply with the provisions of The Act with respect to the types of business NOT exempted in terms of the exemptions in Part 2, S7 (1) (a) [retirement annuity business], S7 (1) (c) [compulsory annuity business], S7 (1) (h) [single premium business below R50000], S7 (10) (g) [all risk business].

Exceptions to the above are S7 (1) (g) (i) [premium increases > R25000 pa], S7 (1) (g) (ii) [non-risk business, except retirement annuity, where the premium > R25000 pa or >R50000 single and the contract is in force < 3 years], and S 7 (1) (k) [any policy where the surrender value in the first 3 years > than 20% of premiums paid].

**Verification of life business transactions coming into the company** [S25 (a) and (b)]

With respect to business transactions coming into the company, it is assumed that the intermediary and branch management will have completed the requirements of The Act as detailed in D1 of this manual.

Compliance Officers and authorized management will:

Check that the requirements have been met in terms of The Act.

Have final sign-off of the documentation before any business is accepted.

Will refer back to the intermediary any business that in their opinion does not comply together with a written report stating the reasons for rejection on the grounds of non-compliance and any additional requirements.

Send copies of all rejections to the Compliance Officer for the FSP.

Any business transactions that either the authorized managers or compliance officers reject will be referred to Legal Services for opinion before the final report is completed.

**Payments in the form of loans and surrenders** (that fall within Part 2 S 7(1) (g) (ii) and S7 (1) (k) of The Act will require documentation to be completed).

If the required documentation is not supplied, the documentation in terms of D1 of this manual must be supplied along with standard surrender/ loan documentation, and authorized by the authorizing manager and compliance officer.

Supplied documentation must be authorized as per 1.4.2 and 1.4.3 above.

### 31.1 Reporting of transactions

Business transactions that are considered suspicious (S29 of The Act) will be dealt with in terms of the provisions in D 5.0 of this manual.

Business transactions that cash or are over-the-threshold (S28 of The Act) will be reported in terms of the provisions of D 4.0 of this manual.

### 31.2 Record Keeping

Records for non-exempt business must be kept in terms of D 2 of this manual.

All records in terms of D 2 will kept on the policy file and in electronic format in terms of the company's record keeping processes.

### 31.3 Auditing

Auditing process will be done on a quarterly basis and will be processes in terms of the Company rules.

**ANNEXURE "D6"**

**FINANCE DEPARTMENT**

The type of receipts shown on the bank accounts of FFG Group and FFG Life Main Account are as follows:-

1. Reassurance receipts from Swiss Re, Cologne, ERC Francona and Gerling Global.
2. Dividend receipts from Absa, FFG Unit Trusts and other financial institutions.
3. Inter Company receipts for expenses incurred and paid by other Group companies.
4. Receipts from agents and brokers where commission has been overpaid or loans have been given.
5. Receipts from the sale of Company assets i.e. vehicles, computers and furniture.
6. Funds from disinvestment of various investments.

Payments are made as follows:-

1. Creditors i.e. running expenses of the Company such as travel, photocopies, telephones and faxes, rent for premises, vehicle expenses, refreshments etc.
2. Foreign payments for overseas subscriptions, traveller's cheques for overseas travel, examination and professional fees, any license fees for computer programmes etc.
3. Inter Company accounts and dividends.

Transactions on the bank accounts are scrutinized on a daily basis.

Any amounts which are not readily identifiable are immediately queried with the bank.

All payments are authorized by two senior personnel and have supporting documentation such as an invoice or requisition with full details of the payment being made.

All transactions over R100 000.00 are authorized by Joe Bizak or Peter Karstel.

We would need to know which transactions over R50 000.00 are required to be reported.

From the manual, it would appear that ALL transactions are required to be reported.



## ANNEXURE "D7"

### FORENSIC AUDIT DEPARTMENT

#### **Financial Intelligence Centre Act – Internal rules (Forensic audit department)**

In terms of FFG Life's internal rules, staff members are to report all suspicious and unusual transactions to the forensic audit department.

Forensic audit department will then report these transactions, online, to the financial intelligence centre.

Herewith the procedures that will apply:

- Suspicious and unusual transaction reports will be received by the forensic audit department on an as and when basis
- These reports will be reviewed, by the forensic audit department, to ensure that:
  - all sections of the prescribed form have been completed correctly;
  - all supporting documentation has been attached, and
  - the reasons given for the suspicion are reasonable
- Any incomplete reports will be returned to the sender with a request that the outstanding information and or documentation be supplied
- Forensic audit will acknowledge receipt of the reports via internal mail or email
- All complete and reasonable reports will be reported, online, and in the prescribed format, to the financial intelligence centre on a weekly basis
- Copies of all reports and supporting documentation will be kept in a secure environment for a period of five years
- Forensic audit department will ensure that the financial intelligence centre acknowledges receipt of the reports and that the relevant reference numbers received from the financial intelligence centre are recorded on the copies of the reports

- Should the financial intelligence centre request further information or documentation regarding reports made, forensic audit department will source this information and or documentation from the department/person who made the initial report

*12 June 2003*

**ANNEXURE "D7"**

**INVESTMENTS DEPARTMENT**

**FINANCIAL INTELLIGENCE CONTROL ACT**

**Main Investment Department activities**

32 “KNOW YOUR CLIENT”

**1. Fund Managers – foreign and local**

A detailed due-diligence questionnaire is completed by fund managers.

Comprehensive agreements, reviewed by our legal experts and signed by duly authorised personnel, are concluded in all cases.

Our auditors can, and do, perform audit verifications, on a test basis, on the above.  
(Example of a due diligence report available if required)

**2. Direct investments (i.e. not via Fund Managers)**

These are only entered into with reputable investment houses after face-to-face meetings and much correspondence e.g. Invesco, TriAlpha.

Application forms must be completed and signed by duly authorised personnel.

Unit Trusts – local Mancos

The presence of these are well known in SA markets as are their reputation and integrity. All unit trusts are governed by Trust Deeds, monitored by the Trustees and the FSB, in terms of the CIS Act.

### 3. **Bank Accounts**

Local – only ABSA and Nedbank (FFG Group bankers)

Call accounts – controlled by Counter Party Risk Limits Policy (see later)

Overseas – Selected, high profile banks where their integrity and presence is beyond question.

### 4. **Custodians / Trustees (Unit Trusts)**

Approval must be obtained from the FSB. Rigorous application and reporting procedure in terms of Long Term Insurance Act.

### 5. **Service providers / software support e.g. RisCura, Peregrine, DiData.**

Well-known, established organisations.

In all cases, proper due diligence is done and agreements are reviewed by our legal department and signed by authorised officials.

### 6. **Committees**

- Investment Management Committee (Board Sub-Committee)  
Administrates the Counter Party Risk Limits Policy
- Asset Allocation

- Mandates

JAD/Fin Intelligence Control Act.doc/mm

**33 ANNEXURE D8 - D10****34 FICA INTERNAL RULES (APPLICABLE TO AGENCY, BROKER AND SALES ADMINISTRATION DIVISION).**

35

**36 THESE RULES MUST BE READ IN CONJUNCTION WITH THE FFG GROUP MANUAL ON FICA.**

1. Managers of branches and regions are responsible for the compliance with the Act and these internal rules within their branches or regions.
  
2. The failure to comply with the provisions of the Act and these internal rules will be dealt with in accordance to the disciplinary procedures as set out in FFG Life's Human Resources Manual.
  
3. Employees who deal with clients in the establishment of business relationships or concluding transactions must ensure that the following rules are complied with:
  - Correct client identification and verification.
  - Record keeping.
  - Verification of the origin of funds.

The manual, which is attached to these rules, will provide all the relevant information applicable during the verification process.

4. Exemptions are however provided by the Act, whereby the above rules will not be applicable.

The marketing of the following products will be exempted:

- A fund policy or a fund member policy.

- Unit trust or linked product investment affected by a pension fund, provident fund or retirement annuity fund.
- An annuity purchased as a compulsory annuity.
- Reinsurance policy issued to another institution.
- Assistance policy.
- A policy which provides benefits only upon death, disability, sickness or injury of the life insured.
- Any long term insurance policy (i.e. endowments) where the annual recurring premiums do not exceed R25 000.

The verification requirements as prescribed in paragraph 3 of these rules will be applicable to this type of policy when:

- Annual recurring premiums exceed R25 000 as a result of automatic increases or alterations by clients.
  - A client surrenders the policy within three years from its commencement.
  - A loan is granted or credit is extended against the policy within three years from its commencement.
- Any long term insurance single premium policy not exceeding R50 000. (The verification requirements as prescribed in paragraph 3 of these rules will be applicable to this type of policy when:

- The client surrenders the policy within three years of its commencement.
  - A loan is granted or credit extended against the policy within three years from its commencement.
- Any long term insurance policy on condition that within the first three years from its commencement the surrender value does not exceed 20 % of the value of the premium paid in respect of the policy.
5. Failure to submit the required documentation together with the application forms will result in the business not being processed.
6. “Know your client” guidelines are also attached to these rules to assist you in complying with the requirements prescribed by the Act.
7. All suspicious or unusual transactions are to be reported irrespective of the size of the transaction to the FICA reporting officer within 5 days of the suspicion arising. The prescribed form is available from your attached FICA manual or the FICA reporting officer.
- A non exhaustive list of suspicious or unusual transactions is provided in the attached manual.
8. No person making, or who must make a report may disclose the fact that a report has been made or the contents of the report to any other person, except as provided for in the manual.

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