Facsimile 0867 277 516



# **STANLIB**

### Liberty Living Annuity

Underwritten by Liberty Group Limited, a registered Long-Term Insurer.

## Related Party Form - Legal Entity

#### **Definitions:**

- Beneficial owner: has shares in the legal entity equal to or greater than 25% holding or owns the bank account used by the entity.
- Controller: exercises control over the entity such as directors or executives.

DETAILS OF RELA	TIONSHIP							
RELATIONSHIP WITH INVESTOR/ENTITY	BENEFICIAL OWNER CONTROLLER							
NAME OF INVESTOR/ ENTIT	Y							
RELATED PARTY DETAILS								
ENTITY NAME*								
REGISTRATION NUMBER*								
DATE OF REGISTRATION*	D D M M Y Y Y Y							
CONTACT NUMBER*								
COUNTRY OF OPERATION								
COUNTRY OF REGISTRATI	DN*							
* Compulsory fields								
PHYSICAL ADDRE	SS S							
COMPLEX/UNIT/ NUMBER	COMPLEX NAME							
STREET NUMBER	STREET NAME*							
SUBURB*	CITY*							
COUNTRY*	POSTAL CODE*							

\*Compulsory fields



#### DECLARATION

We are required to collect, process and share your Personal Information (PI). Your PI is collected and processed by our staff, representatives or sub-contractors and we make every effort to protect and secure your PI. You are entitled at any time to request access to the information STANLIB has collected, processed and shared. PoPIA (Protection of Personal Information Act, 2013) is South Africa's data protection law that aims to protect your personal information. Our latest terms and conditions, available on www.STANLIB.com explain how and why we obtain, use, process, store, verify and share your personal information.

I/We agree to provide all documentation and information required in terms of STANLIB's business rules and the Financial Intelligence Centre Act, No.38 of 2001, and understand that STANLIB is prohibited from processing any transaction on my/our behalf until all such documentation has been provided.

I/We confirm that all information provided herein is true and correct and that I/We have read and understood the contents of this form.

OLONIATURE OF OUTENT	DATE			-			-				
SIGNATURE OF CLIENT/ AUTHORISED SIGNATORY		D	D		M	М		Y	Y	Y	Y
	SIGNED AT										
	DATE			-			-				
SIGNATURE OF CLIENT/ AUTHORISED SIGNATORY		D	D		М	М		Y	Y	Y	Y
	SIGNED AT										

