

Kuza Asset Management Limited Prism Tower-12th Floor, 3rd Ngong Avenue P. O. Box 26180 00100 Nairobi Kenya

Tel: +254 705 666 444 Email: info@kuza.africa Website: https://kuza.africa

KUZA INDIVIDUAL PENSION PLAN

APPLICATION FORM - IN	DIVIDUAL	ACCO	UNT NUMBER			
1. Principal Investor Detai	ils					
-	-ull Names:					
Date of Birth:	Gender	: Male F	Female			
Country of Residence:		Tax PIN Number:				
ID/Passport Number:		Nationality:				
Postal Address and Code:		Town:				
Email Address:		Mobile No:				
Marital Status:						
2. Employment Details						
Employment Status: Employe	ed Self Employed] Unemployed	Other			
If employed, please state the						
Current Occupation						
Employer's Name:						
Employer's Address:						
3. Contributions Details						
Initial Contribution Amount						
	Deduction Bank Transfer	Cheques D	irect Debit Mot	oile Money		
Transfer from another Sc						
Will you be making regular co		No				
If Yes, choose frequency:			mi-Annually A	Annually		
4. Source of Funds	,	,	,	,		
	•	rs (specify):				
	d reserves the right to seek further in		on on the source of funds to	o be invested.		
5. Physical Address						
	ow is a description of my residentia	al/business address. A des	cription has been provide	ed as I do not		
have any utility bill that may be used to verify the address.						
Client Address Description						
Land Registration (L.R)						
Number House Number						
Building/Estate Road/Area/Town						
6. FATCA/CRS Declaratio	-					
			Vac	No.		
Are you a US Resident, Citizer			Yes	No .		
Are you registered for tax in a			Yes	No		
Country (ies) of Tax Residency	Tax Identification Number		Not Applicable (Tick w	nere applicable)		
1.	+		Yes	No		
2.	+		Yes	No		
7. Investor Bank Details						
Account Name:						
Account Number:		Urrency:				
Account Number: Currency: Bank: Branch:						
Any Instructions of change of Investor bank Details MUST be provided in writing with certified proof.						

8. Beneficiary Nomination Form					
I declare that the information provided below is to the best of my knowledge and belief true and complete and agree that this					
application shall form the basis of the contract between me and the Company. I understand further that the Trustees of the scheme					
have the final discretion to decide v	vho should receive be	enefits but I reques	t them to act accor	ding to my nominati	on.
BENEFICIARY NAME	DATE OF BIRTH	RELATIONSHIP	ID NUMBER	MOBILE NO.	PROPORTION%
9 Bank Account Details					
Deposit your contributions into the	bank account below				
ACCOUNT NAME	KUZA INDIVIDUAL PENSION PLAN COLLECTION A/C				
ACCOUNT NUMBER	1080284541294	1080284541294			
BANK	EQUITY BANK (KENYA) LIMITED				
BRANCH	MOMBASA ROAD				
BANK SWIFT:	EQBLKENA				
M-PESA PAYBILL NUMBER	247247				
CURRENCY:	KES				
Kuza Asset Management Limited ac					
should be made directly into the colle					
deposit slip will be deemed as a receip	ot but not as value by I	Kuza Asset Managen	nent Limited until fui	nds are sighted in the	account.
10. Signing Mandate					
Client Acknowledgement:					
By checking this box, I/we cont					
Privacy Policy. I hereby authorize Kuz					
me/us, confidentially with third-party service providers, business partners and/or other parties which may be sited outside of Kenya, for setting					
up and administering our investment account with Kuza, customer services and to allow Kuza and/or its business partners to perform marketing					
and related activities, until Kuza receives our written instructions to the contrary.					
I confirm that I/we have read and understood, and hereby consent to the general terms and conditions, and hereby make the above declaration. I hereby declare that the particulars provided above are true to the best of my knowledge and agree to abide by the rule and					
regulations of the Fund.	particulars provided di	Jove are true to the	best of filly knowleds	e una agree to abiae	by the rule and
Name			Signature		Date
Authorized Signatory					
For official use only					
KYC Documents for all Signatories					Tick
1. Copy of Official Identification Document or Current Passport.					
2. Copy of PIN or Tax Exemption Certificate (where applicable).					
3. Proof of Banking details: Original canceled cheque; Copy of ATM Card; Bank Statement or Certified letter from					
the bank (not more than three months old).					
4. Proof of Investment: M-Pesa Transaction Number, Cheque, RTGS or Deposit Slip.					



Financial Advisor	Name:	Code:
	Email:	Telephone:
	Signature:	Date:
Administrator	Name:	
	Signature:	Date:
Compliance Officer	Name:	
	Signature:	Date:

GENERAL TERMS AND CONDITIONS

- **A.** Completed application forms and notification of deposits/cleared funds must be received for the investment to be executed.
- **B.** Past performance is not a guide to future performance and may not be repeated. There is no guarantee that the investment objectives will be attained. The income from them may fall as well as rise and Clients may not realize their initial investment.
- C. The Fund Manager may accept Client instructions received through electronic communication from Clients who have consented to the Email Indemnity provided in this Application or executed and delivered an Email Indemnity in the form prescribed by the Fund Manager. The Client acknowledges that the Fund Manager reserves the right at its sole discretion to require the Client to provide hard copy written instructions in specific instances.
- D. The Client and/or his/her financial advisor shall at all times be responsible for ensuring that the Fund Manager and its representatives receive any instructions from the Client and/or financial advisor, whether by facsimile or mail and that such instructions are complete and correct in all respects.
- **E.** Clients are reminded that in certain specified circumstances their right to redeem their investments may be suspended.
- **F.** No third-party cheques are allowed. Payments from third parties made on your behalf may be accepted on an exceptional basis and solely at the discretion of Kuza Asset Management Limited.

- **G.** Once an account has been opened, a statement of investment will be sent by Email to the Client on a monthly basis.
- **H.** All transaction charges on purchasing securities shall be borne by the Client and not the Fund Manager.

DECLARATIONS

- A. I confirm that the information provided in this application, together with all supporting documentation that will be supplied in connection with this application, is true, correct and accurate. I hereby consent that Kuza Asset Management Limited may verify the information provided using such reasonable and necessary verification mechanisms.
- **B.** I confirm that the money used for this investment does not arise out of the proceeds of any money laundering or other illicit activities.
- **C.** I warrant that I have full power and authority to enter into and conclude this transaction.
- **D.** I confirm that the Investments are not being acquired either directly or indirectly by or on behalf of any person restricted by law of any relevant jurisdiction from acquiring the Investment.
- E. I hereby consent to all redemption proceeds made to me being paid in accordance with my payment instructions above and as may be varied as per my written instructions. I hereby accept full responsibility for securing the integrity of my selected payment mode, and fully indemnify Kuza Asset Management Limited from any claims, losses or liabilities that it may incur in connection with the

- processing of payment in accordance with my instructions.
- **F.** | hereby unconditionally unequivocally agree that Kuza Asset Management Limited shall be entitled to act upon any instructions issued through my registered profile on a Kuza Asset Management Client Portal or through electronic mail from my/our indicated email address (including scanned copies documentation) which instructions shall be binding and enforceable against me notwithstanding that any such instruction may later be shown to be in any way false, incomplete, inaccurate, delayed, erroneous, unauthorized or otherwise not authentic.
- G. I agree that Kuza Asset Management Limited shall not be responsible for any liability, losses or damages resulting from such electronic instructions, except where the loss results from gross negligence or fraud on Kuza's part. I agree to fully indemnify Kuza Asset Management Limited against any proceedings, claims, expenses, and liabilities which may be taken or made against Kuza by reason of Kuza acting on my instructions.
- **H.** I consent to the disclosure of the information provided in this application for compliance purposes to Kuza Asset Management Limited or its agents and the necessary regulators and government agencies.
- I. Upon receipt, I shall review all statements and will notify the Fund Manager immediately if there is a discrepancy.

