

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

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KUZA INDIVIDUAL PROVIDENT PLAN

APPLICATION FOR	M - INDIVIDUAL		A	CCOUNT NUMBI	ER .	
1. Principal Investo	or Details					
Title:	Full Names:					
Date of Birth:	T dil Ivanics.	Gender:	Male	Female		
Country of Residence		- Ceriuer.	Tax PIN Number:	I emale		
ID/Passport Number:			Nationality:			
Postal Address and C						
Email Address:	nd Code: Town: Mobile No:					
Marital Status:			Mobile No.			
	4-9-					
2. Employment De		Calf Francisco d	11		Otlogo	
Employment Status:		Self Employed	Unempl	oyed	Other	
	state the information b	pelow:				
Current Occupation						
Employer's Name:						
Employer's Address:						
3. Contributions D						
Initial Contribution A						
Mode of Payment:	Salary Deduction	Bank Transfer	Cheques	Direct Debit	Mobile Money	
Transfer from ar		Other				
Will you be making re		Yes	No			
If Yes, choose freque	*	ly Qua	rterly	Semi-Annually	Annually	
4. Source of Funds						
	ts Salary/Bonus		rty Sale 🔲 Sav	ings Pension,	/Gratuity	
☐ Inheritance/Gift	☐ Winnings/Lotte	· —				
		right to seek further info	ormation or docume	ntation on the source	e of funds to be invested.	
5. Physical Addres		inting of my regidential	/husiness address	A description has be	an provided as I do not	
	nat may be used to ver		/ business address.	A description has be	een provided as I do not	
Client Address Descr		iry tric address.				
Land Registration (L.F						
Number	'					
House Number						
Building/Estate						
Road/Area/Town						
6. FATCA/CRS De	claration					
	nt, Citizen or do hold a	Green Card?		Yes 🗍	No 🗀	
,	or tax in any other cou			Yes	No 🗆	
Country (ies) of Tax		cation Number			ole (Tick where applicable)	
Residency	Tax identili	Cation Number		Пот Аррпса	ле (тіск where арріісавіе)	
1.				Ye	s No	
2.				Ye		
7. Investor Bank D	etails					
Account Name:	Callo					
Account Number:		Cu	rrency:			
Bank:			anch:			
	ange of Investor hands	Details MUST be provide		ified proof		
Arry mistructions of che	ange of mivestor bank D	retuiis ivios i be providei	a in writing with cert	пеи ргоој.		

8. Beneficiary Nomination Form							
I declare that the information provi	ded below is to the be	est of my knowledg	ge and belief true a	nd complete and agr	ee 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							
ACCOUNT NAME	KUZA INDIVIDUAL	KUZA INDIVIDUAL PROVIDENT PLAN COLLECTION A/C					
ACCOUNT NUMBER	1080284541294						
BANK	EQUITY BANK (KE	EQUITY BANK (KENYA) LIMITED					
BRANCH	MOMBASA ROAD						
BANK SWIFT:	EQBLKENA						
M-PESA PAYBILL NUMBER	247247						
CURRENCY:	KES						
Kuza Asset Management Limited ac	cepts Personal/Corpor	ate and Banker's Cl	heques. No third-pa	rty cheques will be a	accepted. Payments		
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 fu	nds are sighted in the	account.		
10. Signing Mandate							
Client Acknowledgement:							
By checking this box, I/we cont							
Privacy Policy. I hereby authorize Kuza to collect, use, disclose, and/or process our personal data or information without further notification to							
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 al	oove are true to the	best of my knowleds	ge ana agree to abiae	by the rule and		
Name			Signature		Date		
Authorized Signatory							
For official use only							
KYC Documents for all Signatories							
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.

