

## Debit order form

Policy/Contract number/s

### Requirements

- 1. A certified copy of your identity document (both sides of card driving licence, identity document or passport).
- 2. A copy of your original, complete bank statement or a cancelled cheque in confirmation of your bank details.
- 3. FICA information, if not updated within the last 24 months.

### Contact person for requirements

We will contact the client if this section is not filled in or if we cannot reach the contact person

Name   
 Contact number  Fax number   
 E-mail address

### Section 1: Policyholder/Investment owner details

Title  Initial/s  First name   
 Surname/Name of legal entity   
 Previous surname/s   
 Type of legal entity (if legal entity)  Natural person  Sole Proprietor  Company/Close Corporation   
 Partnership (all natural persons)  Partnership (other)  Nontaxable institution   
 Contact person for legal entity   
 Gender  Male  Female  Correspondence language  English  Afrikaans   
 Date of birth  DD/MM/YYYY  
 Identity/Registration/Passport number  RSA ID  Yes  No   
 Postal address   
 Postal code   
 Residential address   
 Postal code   
 Telephone - work  Fax - work   
 Telephone - home  Cellphone number   
 E-mail address   
 Preferred method of communication  Post  E-mail

For the time being, certain documents from Momentum are not available electronically. We will post those to you.

### Section 2: Premium/Contribution payer details

Title  Initial/s  First name   
 Surname/Name of legal entity   
 Previous surname/s   
 Type of legal entity (if legal entity)  Natural person  Sole Proprietor  Company/Close Corporation   
 Partnership (all natural persons)  Partnership (other)  Nontaxable institution   
 Contact person for legal entity   
 Gender  Male  Female  Correspondence language  English  Afrikaans

**Policy/Contract number/s**

**Section 2: Premium/Contribution payer details (continued)**

Date of birth

Identity/Registration/Passport number  RSA ID Yes  No

Postal address   
 Postal code

Residential address   
 Postal code

Preferred method of communication Post  E-mail

For the time being, certain documents from Momentum are not available electronically. We will post those to you.

**Section 3: Loan/Debt repayment details**

Please give details of any loan/debt repayments that we must include in this debit order

Policy/Contract number/s  Repayment amount

**Section 4: Account details**

Name and surname of account holder

Name of financial institution

Account type Current/Cheque  Savings  Transmission

Account number  Branch code  -  -

Deduction date

Should Momentum group all collections from this account number and deduct them from your account as one amount? Yes  No

- I, the undersigned, authorise Momentum to debit my account with the contributions due for the investment. I undertake to inform Momentum of any change in my bank details and I authorise Momentum to verify such bank details with my bank. I accept that Momentum may debit my account on a date other than that specified. If I am signing on behalf of an institution, I declare that I am duly authorised to do so.
- This authorisation will remain in force until I cancel it in writing.
- Momentum can deduct premiums/contributions on any day that I choose, but from the 1st to the 20th of the month, Momentum will deduct the amount for the current month. From the 21st to the end of the month, Momentum will deduct the amount for the following month. This means that two payments can initially be deducted.
- Although Momentum takes the utmost care to facilitate the debit order correctly and timeously, it remains the responsibility of the policyholder/ investment owner to make sure that premiums/contributions are paid on the policy/contract.

**Signature of account holder/ authorised signatory**

**Date**

**In the event of a legal entity**

1. Registration number

2. **I am/We are duly authorised to represent the legal entity**

**Signature**

3. Name

4. Designation