



## Sanlam Secure Services: Registration of proxy

Complete this form to nominate a person to act on your behalf on Secure Services. The person granting the privilege is the owner of the product and is referred to as the proxy giver. The person receiving the authority is referred to as the proxy holder.

This facility is not for registering an intermediary to work on your behalf. Intermediaries should use the appropriate tools at their disposal for registration.

After completion, please submit this form together with any supporting documents to the Sanlam Life Client Contact Centre via:

- E-mail [life@sanlam.co.za](mailto:life@sanlam.co.za)
- Fax +27 (0)21 947 9440

This authority only applies to Secure Services and does not extend to other service channels.

### Authorisation and supporting documents

This form must be signed by the proxy giver and the proxy holder.

We require the following supporting documents

For the proxy giver:

- copy of ID document.
- copy of utility bill in the name of the proxy giver with the residential address displayed, (preferably a cellphone account,) not older than 3 months,

For the proxy holder:

- copy of ID document
- copy of utility bill in the name of the proxy holder with the residential address displayed, (preferably a cellphone account), not older than 3 months.

### Details of proxy giver (the product owner)

Name and Surname \_\_\_\_\_

ID/ passport number \_\_\_\_\_ Country of issue \_\_\_\_\_

Email address \_\_\_\_\_ Cellphone number \_\_\_\_\_

Residential address \_\_\_\_\_

Insurance

Financial Planning

Retirement

Investments

Wealth

## Details of proxy holder

Name and Surname \_\_\_\_\_

ID/ passport number \_\_\_\_\_ Country of issue \_\_\_\_\_

Email address \_\_\_\_\_ Cellphone number \_\_\_\_\_

Residential address \_\_\_\_\_

Signature of proxy holder \_\_\_\_\_

## Privileges for the proxy holder at each Sanlam business

Please provide at least one product number per business. Although only one product number is provided, the proxy holder will be able to access all products for that business.

**Sanlam Private Wealth product number** \_\_\_\_\_

### Privileges

Level 1: View

**Glacier product number** \_\_\_\_\_

### Privileges (please select one)

Level 1: View

Level 2: Includes level 1 PLUS switch/ rebalance funds

Level 3: Includes level 2 PLUS sell units

**Sanlam Collective Investments product number** \_\_\_\_\_

### Privileges (please select one)

Level 1: View

Level 2: Includes level 1 PLUS transact

**Satrix product number** \_\_\_\_\_

**Privileges** (please select one)

Level 1: View

Level 2: Includes level 1 PLUS transact

**Sanlam Individual Life product number** \_\_\_\_\_

**Privileges**

Level 1: View

**Sanlam SKY product number** \_\_\_\_\_

**Privileges**

Level 1: View

## Granting of authority

I confirm that I am the owner of the product(s) indicated in this form.

I approve the privileges requested in this form.

I indemnify Sanlam and/or any of its subsidiaries against any claims as a result of granting this authority.

\_\_\_\_\_  
Signature of proxy giver

**Signed at** \_\_\_\_\_ **on** \_\_\_\_\_ **date** (dd/mm/ccyy)