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www.discovery.co.za

Cession form

How to complete this form

To enable Discovery Invest to process the form quickly and correctly, please ensure that it is completed in full.

1. Please complete the form in black ink and print clearly
2. Complete one letter per block
3. Where you need to make a choice between different options, please mark your selection with an X
4. Discovery Invest does not accept responsibility for the validity of this cession
5. If cedent is a trust, company, close corporation or other juristic person, the signatory must submit written proof of his/her authority to effect this cession with this document
6. For absolute cession, Discovery Invest requires the new investor's FICA documentation (proof of address and copy of identity document)

Process to submit this form to Discovery

1. Please fax this document to Discovery Invest on 011 539 5777 or email it to invest_servicing_support@discovery.co.za or you can send it to your financial adviser
2. Should you have queries about this form, please contact Discovery on 0860 67 5777.

A. Details of cedent (current owner)

Investment number Effective date

Full names of cedent

Contact number

Email address

Postal address

Code

I hereby warrant that I am the policyholder of the above contract and cede to the cessionary indicated below all my rights, title and interest in the contract

Signed at on

Signature of cedent or for cedent

The products are administered by Discovery who has the necessary licenses and authorities and is an authorised financial services provider.

B. Details of cessionary (new owner)

Title First name/s

Surname/company name

Company registration number Reference/bond number

Date of birth Identity or passport number

Postal address

 Code

Residential address

 Code

Telephone (H) (W)

Fax Cellular

Email address

Signature of cessionary

C. Details of cession

Type of Cession	Conditions/ Restriction, ie Rand amount
Absolute <input type="checkbox"/>	
Collateral <input type="checkbox"/>	

D. Tax details of cessionary (to be completed for absolute cessions)

Is the cessionary a:

Company or close corporation Tax exempt body Individual Other

E. Nomination of beneficiary (to be completed for absolute cessions)

Initials	Surname	ID Number	Relationship to cessionary	Add up to 100%.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I, the cessionary, hereby appoint the following beneficiary/ies to receive the death benefits of the spouse under the policy.

E. Tax status of owner

- Trust with natural person as a beneficiary
- Trust with companies as a beneficiary
- Trust with non-taxable institution as beneficiary

F. Payment details (to be completed for absolute cessions)

I hereby authorise Discovery Invest to debit my bank or building society account, wherever it may be conducted, in accordance with the Discovery Invest debit order system for any amounts due in terms of the contract. I undertake to advise Discovery Invest in writing of any changes to my account details and accept that Discovery Invest will not be held responsible should incorrect details be provided.

Name of account holder	<input type="text"/>																											
Name of bank	<input type="text"/>																		Branch	<input type="text"/>								
Branch code	<input type="text"/>						Account type (excluding credit card)	<input type="text"/>																				
Account number	<input type="text"/>																											
Signature of account holder (if different from cessionary)	<input type="text"/>																											

Date cession recorded

D	D	M	M	Y	Y	Y	Y
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 for Discovery Invest _____

Note: by recording this cession, Discovery Invest does not express an opinion regarding the validity of the cession

G. Financial adviser details

Principal financial adviser code	<input type="text"/>																											
Financial adviser name	<input type="text"/>																											
Financial adviser surname	<input type="text"/>																											
Financial adviser house	<input type="text"/>																											
Financial adviser house code	<input type="text"/>																											
Telephone	(w)	<input type="text"/>										Cell	<input type="text"/>															
Email address	<input type="text"/>																											

Signature of the financial adviser Date

D	D	M	M	Y	Y	Y	Y
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