

## Adviser fee revision form

- Use this form to confirm or change the advisory fees we pay to your financial adviser.
- You cannot use this form to review your ongoing financial adviser fee for a PSG Wealth Retirement Annuity where a Section 14 transfer was done. You need to complete the Section 14 fee revision form.
- Send the completed form to [instructions@psg.co.za](mailto:instructions@psg.co.za).
- If you need assistance, please contact your financial adviser or one of our client service consultants on 0860 774 774 or at [clientservice@psg.co.za](mailto:clientservice@psg.co.za).

### Investor details

Name and surname/Name of company or trust

ID/Passport number/Registration number

Investment number

### Adviser details

Name and surname

FSP name

FSP code

Financial adviser code

Agency code

### New advisory fees

I agree to pay my financial adviser the following advisory fees on the investment listed in the Investor Details section:

Recurring contribution  % excl. VAT

Additional contributions  % excl. VAT

Ongoing financial advisory fee  % excl. VAT

Model portfolio management fee  % excl. VAT

Please indicate any fund-specific fees in the table below:

Fund name	Class	Ongoing financial advisory fee (excl. VAT)	
			%
			%
			%
			%
			%



## Fees

You may choose to have your ongoing investment administration fee and financial adviser fee deducted from a specific fund instead of proportionately from each fund. This will be known as your preferred fee fund.

Do you require a preferred fee fund? ☐ Yes ☐ No

Fund name	Fund class

## Signatures

By signing this form, I confirm that:

- I have given PSG accurate information.
- I understand that PSG Invest, as the administrator of this investment, is not authorised to provide any financial advice.
- my appointed financial adviser will have access to my investment details.
- I have read and accept the terms and conditions of my investment.
- I authorise PSG to pay the fee to my financial adviser on my behalf.

### Investor

Investor signature  Date

If you are signing on behalf of the investor, please provide your details below.

Name  Surname   
ID/Passport number  Designation   
Signature

### Financial adviser

Signature  Date

## Contact details

**Physical address:** Building 1, The Ingress, Corner of Magwa and Lone Creek Crescents, Waterfall City, Waterfall, 2090, Gauteng, South Africa  
**Postal address:** PO Box 61295, Marshalltown, 2107  
**Sharecall:** 0860 774 774  
**Email:** [clientservice@psg.co.za](mailto:clientservice@psg.co.za)  
**Website:** [www.psg.co.za](http://www.psg.co.za)