

INFORMATION REQUIRED TO REGISTER

AN INTER VIVOS TRUST

1. LANGUAGE

Afrikaans

English

2. SUGGESTED NAME OF TRUST

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3. DONOR / FOUNDER

- Full names:
- ID number:
- Postal address:
- Home address:
- Occupation:
- Relationship to estate owner:

4. TRUSTEE (1)

- Full names:
- ID Number :
- Postal address :
- Home address :
- Occupation :
- Tel: (b)..... (h).....
- Email:

5. TRUSTEE (2)

- Full names:
- ID Number:
- Postal address:
- Home address:
- Occupation:
- Tel: (b).....(h).....
- Email:

6. TRUSTEE (3)

- Full names:
- ID Number:
- Postal address:
- Home address:
- Occupation:
- Tel: (b).....(h).....
- Email:

7. BENEFICIARY (1) Short description of beneficiary or class of beneficiaries

- Full names:
- ID number:
- Address:
- Occupation:
- Relationship to founder:

8. BENEFICIARY (2)

- Full names:
- ID number:
- Address:
- Occupation:
- Relationship to founder:

9. BENEFICIARY (3)

- Full names:
- ID number:
- Address:
- Occupation:
- Relationship tot founder:

10. BENEFICIARY (4)

- Full names:
- ID number:
- Address:
- Occupation:
- Relationship to founder:

11. INFORMATION REGARDING BANK ACCOUNT IN SOUTH AFRICA

(to be opened)

- Bank:
- Branch:

Note: Trust must be registered at the High Court where the banking account is opened.)

12. INFORMATION REGARDING AUDITOR / ACCOUNTANT /

BOOKKEEPER IN SOUTH AFRICA

- Name of accounting office / organisation:

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- Full names of representative:

- ID no. of accounting officer / representative:

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- Governing body (SAICA, SAIPA, SAIT etc) and member number:

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- Address:

- Office Tel:

- Cell:

- Email:

PLEASE ATTACH THE FOLLOWING:

- Copies of the ID's of the Founder and of each Trustee.

- Proof of residence of each trustee