



## **KYC/FICA FORM**

PLEASE NOTE

- All mandatory fields must be completed.
- Ensure that all information provided is accurate and all required documents as stated on the checklist are attached when sending this form.
- No instruction will be processed unless all the above requirements have been met.
- Completed forms are to be faxed to us on 012 315 5675 or e-mailed to queries@rsaretailbonds.gov.za
- Should you have any queries regarding this form, please contact us on 012 315 5888.

PERSONAL DETAILS*- (Mandatory)	
Surname: Full I	Name:
Contact Number: Ema	il Address:
ID Number: Investor No	umber:
<b>SUPPORTING DOCUMENTATION*</b> (check if all required documents are attached when sending this form and tick the relevant box on the below list) Mandatory.	
Certified ID Copy (not older than 3 months)	
Proof of residence (Utility bill, affidavit, telephone account, not older than 3 months)	
Stamped banking details (Bank statement, bank account of	onfirmation letter (not older than 3 months)
INVESTORS SIGNATURE* Mandatory	
I confirm that all information provided in this form and all other documents signed by me in connection with this application, whether in my handwriting or not, are correct.	
I consent to RSA Retail Savings Bonds processing my personal information according to the Terms and Conditions.	
I confirm that RSA Retail Savings Bonds may accept instructions in the prescribed format by fax or via other electronic means.	
Full Names and Surname:	Signature: Date: Y Y Y M M D D