

**ON FSP LETTERHEAD**

**REPRESENTATIVE'S SECTION 13 LETTER OF AUTHORITY**

I, the undersigned, duly authorised to issue this certificate on behalf of

**NAME OF FSP, ("FSP") licence #00000**  
hereby certify that

**REPRESENTATIVE NAME (ID 000000 0000 00 0)**

is mandated by the Financial Services Provider ("FSP") as a representative  
of the FSP in terms of a written agreement.

**REPRESENTATIVE'S DATE OF APPOINTMENT BY FSP: 01 JANUARY 2010**  
**DATE OF ISSUE OF THIS CERTIFICATE: 01 JANUARY 2014**

I hereby confirm the following in respect of the representative:

- ✓ that the FSP has entered into a representative agreement with the representative;
- ✓ that the FSP accepts responsibility for those activities of the representative performed within the scope of the said agreement;
- ✓ that the representative meets the fit and proper requirements insofar as the personal character qualities of honesty and integrity, competence regarding experience, qualifications and knowledge tested through regulatory exams as well as continuous professional development;
- ✓ that the representative possesses the necessary operational ability to carry out his duties as can be reasonably expected of a representative;
- ✓ that the representative has been mandated to render advice and/or intermediary services to clients in respect of the following product categories.

**CATEGORY I**

FINANCIAL PRODUCT	Advice		Intermediary Services		Services under supervision
	Automated	Non-automated	Scripted execution of sales	All other intermediary services	
1.1 Long-term Insurance Subcategory A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 Short-term Insurance Personal Lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3 Long-term Insurance Subcategory B1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4 Long-term Insurance Subcategory C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.5 Retail Pension Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.6 Short-term Insurance Commercial Lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7 Pension Fund Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.8 Shares	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.9 Money Market Instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.10 Debentures and Securitised Debt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.11 Warrants, certificates and other instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.12 Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.13 Derivative instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.14 Participatory Interests in a Collective Investment Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.15 Forex Investment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.16 Health Service Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.17 Long-term Deposits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.18 Short-term Deposits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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1.19 Friendly Society Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.20 Long-term Insurance Subcategory B2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.21 Long-term Insurance Subcategory B2-A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.22 Long-term Insurance Subcategory B1-A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.23 Short-term Insurance Personal Lines A1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.24 Structured Deposits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.25 Securities and Instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.26 Participatory Interest in a Hedge Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**CATEGORY II**

<b>FINANCIAL PRODUCT</b>	<b>Intermediary Services</b>	<b>Services under supervision</b>
2.1 Long-term Insurance Subcategory B1	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Long-term Insurance Subcategory C	<input type="checkbox"/>	<input type="checkbox"/>
2.3 Retail Pension Benefits	<input type="checkbox"/>	<input type="checkbox"/>
2.4 Pension Fund Benefits	<input type="checkbox"/>	<input type="checkbox"/>
2.5 Shares	<input type="checkbox"/>	<input type="checkbox"/>
2.6 Money Market Instruments	<input type="checkbox"/>	<input type="checkbox"/>
2.7 Debentures and Securitised Debt	<input type="checkbox"/>	<input type="checkbox"/>
2.8 Warrants, Certificates and other Instruments	<input type="checkbox"/>	<input type="checkbox"/>
2.9 Bonds	<input type="checkbox"/>	<input type="checkbox"/>
2.10 Derivative instruments	<input type="checkbox"/>	<input type="checkbox"/>
2.11 Participatory Interest in one or more Collective Investment Schemes	<input type="checkbox"/>	<input type="checkbox"/>
2.12 Forex Investment	<input type="checkbox"/>	<input type="checkbox"/>
2.13 Long-term Deposits	<input type="checkbox"/>	<input type="checkbox"/>
2.14 Short-term Deposits	<input type="checkbox"/>	<input type="checkbox"/>
2.15 Long-term Insurance Subcategory B2	<input type="checkbox"/>	<input type="checkbox"/>
2.16 Long-term Insurance Subcategory B2-A	<input type="checkbox"/>	<input type="checkbox"/>
2.17 Long-term Insurance Subcategory B1-A	<input type="checkbox"/>	<input type="checkbox"/>
2.18 Structured Deposits	<input type="checkbox"/>	<input type="checkbox"/>
2.19 Securities and instruments	<input type="checkbox"/>	<input type="checkbox"/>
2.20 Participatory interest in a Hedge Fund	<input type="checkbox"/>	<input type="checkbox"/>

I, further confirm that the representative is / is not required to render advice and/or intermediary services under supervision. The contact details of the supervisor or responsible key individual is included in the attached disclosure document. The representative is required to provide you with a copy of this letter of authority and the disclosure document, either electronically or in hard copy PRIOR to the rendering of any advice and/or intermediary services as prescribed by Sec 13. The representative also needs to be able to prove that he did adhere to this requirement.

Name of authorising Key Individual			
Tel. No:		Cellular No:	
E-mail address:			
Signature of KI			