



## Addition of FA / Assistant

Kindly complete all relevant sections in full. The applicant must initial all amendments made to this form. Please email all pages of this form together with any required supporting documents to our new business service center at [business@sabullion.co.za](mailto:business@sabullion.co.za) or fax to 0865047857

### Step 1 FSP Details

FSP Name

SA Bullion Code

### Step 2 Financial Advisor Details

In what capacity do you represent your FSP?      Key Individual       Representative

Number of years experience in financial services?

Number of years with current FSP?

Title  First Name(s)

Surname  Identity No.

Date Of Birth  Passport No.

Nationality  Income Tax No.

Street Address

Postal Code  Country

Postal Address Same as Residential Address      Yes       No

Postal Address

Postal Code  Country

Telephone Work  Telephone Home

Mobile  Fax

Email Address

### Step 3 Assistant Details

Title  First Name(s)

Surname  Identity No.

**Step 3****Assistant Details**

Date Of Birth	<input type="text"/>	Passport No.	<input type="text"/>
Telephone Work	<input type="text"/>	Telephone Home	<input type="text"/>
Mobile	<input type="text"/>	Fax	<input type="text"/>
Email Address	<input type="text"/>		

**Step 4****Declaration**

I / We warrant that the information contained herein is true and correct, and that, where this application is signed in a representative capacity, I / We have the necessary authority to do so and that this transaction is within my / our powers. I / We understand that this completed form constitutes the entire agreement between SA Bullion and Myself / Ourselves.

On behalf of the FSP duly authorised;

On behalf of the Financial Advisor

Name:	<input type="text"/>
Signature:	<input type="text"/>
Date:	<input type="text"/>

Name:	<input type="text"/>
Signature:	<input type="text"/>
Date:	<input type="text"/>

\* Kindly attach a copy of a bar-coded ID / Passport for the financial advisor