

THIRD PARTY CONSENT FORM**Documents To Be Provided by The Third Party (full KYC to be done on Third Party)**

- ▲ Copy of third party's Proof of
- ▲ IdentityProof of Banking Details
- ▲ Proof of Residence

All documents provided by the Third Party must be sent to: compliance@afrimarkets.co.za

Third Party Information

First Name and Surname _____
Date of Birth _____
Identity Number _____
Passport (If Foreign _____
National) _____
Country _____
Address _____
Postal Code _____
Email Address _____
Mobile Number _____

Third Party Banking Details

Account holder _____
Name of bank _____
Branch name _____
Branch code _____
Account number _____
Account type _____ Current Savings Transmission

The abovementioned banking details to be used for a single deposit of the amount R _____

Declaration

- ▲ I _____(account holder) acknowledge and consent to a third-party depositor depositing money on my behalf or in their own personal capacity into the AfriMarkets account number _____.
- ▲ The third-party acknowledges and consents to depositing on behalf of the account holder into the AfriMarkets account number _____.
- ▲ This does not render the third-party depositor access to the account nor to the proceeds accrued on the account.
- ▲ Withdrawals will only be withdrawn by the account holder.
- ▲ The account holder has the right to withdraw consent and revoke third party depositing at any time.

Account Holder Signature**Third Party Depositor Signature**_____
Date __________
Date _____