Tomorrow, Today

Stock Brokers I Investment Advisors I Fund Managers
Jangid Plaza • 2nd Floor • Office 201 • Ali Hassan Mwinyi Road • Dar es Salaam
T: +255 22 2926 578 • E: info@tanzaniasecurities.co.tz

# Investment Mandate Instruction Form

PHOTO

## Client's name

Please provide us with below information for KYC purposes and proper investment guidance. Please inform us immediately if your circumstances change to the extent that it might affect decisions or recommendations we make.

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# Section 1: Policy Details

***If more than 2 applicants, please use boxes on page 5***

**Policyholder's name:** ______

**Title** Mr. ☐ Mrs. ☐ Miss ☐ Dr. ☐

| | |
|---|---|
| **Surname** | |
| **Forename(s)** | |
| **P.O Box** | |
| **Email** | |
| **Address** | |
| **Mobile** | |
| **Fax** | |
| **Date of birth** | |
| **Place of birth** | |
| **Nationality** | |
| **TIN** | |
| **Next of Kin** | |
| **Relation to Next of Kin** | |
| **Mobile** | |
| **Beneficiary** | |
| **R/ship** | |
| **Address** | |
| **Mobile** | |

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## Section 2: Bank Information

| Bank Details | |
|---|---|
| Account Number | |
| Account Holder Name | |
| Bank | |
| Branch | |

## Section 3: Investment Mandate

| | |
|---|---|
| **Initial amount invested (Minimum of Tshs 5 million; can accept investments of lesser amount in our own discretion)** | |

**Tick appropriate box:** **Cash** ☐ **Cheque** ☐ **Direct Fund Transfer** ☐

## Section 4: Service Details

**>> Service category (Types of Accounts) please select the category of service required.**

***Discretionary Portfolio Service (DPS)*** ☐

You appoint us, on the terms of this form, to manage your cash and investments on a discretionary basis. These are only held in your account with TSL. You authorize us, without prior reference to you, to exercise absolute discretion in the investment of such cash and investments. Taking account of your investment objective, attitude to risk and any other relevant information, your investments will be individually tailored to best match needs.

**A discretionary service with the choice of three mandates explained on page 5. Please go to Section 4**

***Managed Portfolio Service (MPS)*** ☐

You appoint us on the terms of this form to manage on advisory basis the cash and investments normally held in your account with TSL. We will accept responsibility on a continuing basis for advising on the composition of your portfolio and on the individual investments therein. Investment advice will be provided on the basis of your investment objectives, liquidity requirement and attitude to risk.

***Non Managed/Execution Only Services*** ☐

You appoint us, when requested, to provide you from time to time with investment advice on the basis of your investment objectives, liquidity requirements and attitude to risk. We will only execute a transaction on your behalf once we have specific instructions from you to execute the transaction. We will or we may not give any advice on the merits of the transaction.

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## Section 5

### >> Time horizon

This is the period over which an investment is made or held and time horizon in this context can range from a few months to several years. Knowing your time horizon is extremely important in terms of helping us recommend suitable types of investment. All things being equal, a short time horizon would normally indicate a high exposure to fixed interest and little or no exposure to equities. A medium to long time horizon would normally suggest a higher exposure to assets such as equities in order to protect the portfolio against inflation.

**Less than 1 year** ☐ **1-3 years** ☐ **Over 3 years** ☐

### >> Risk tolerance level

Your financial circumstances will principally determine your capacity for risk and you may have to accept more than you initially anticipate in order to achieve your long-term objective. All investment involves an element of risk to capital and/or income there will be periods when the short-term return differs from the long-term objective. Please indicate below your tolerance to short –term fluctuations in capital or income.

**Low** – little or some tolerance to fluctuations/valuation of capital value providing current income is maintained in normal market circumstances. ☐

**Medium** – some tolerance to fluctuations of capital value and/or current income in normal market circumstances. ☐

**High** – a large part of the portfolio can be subject to increased risk and the possibility of significant fluctuation of capital value in order to generate potentially higher returns. ☐

### >> Asset allocation

| Type of Investment | Asset allocating range | | |
|---|---|---|---|
| | Minimum (Amount) | Strategic | Maximum (Amount) |
| Equities | | | |
| Government Bonds | | | |
| Rated Corporate Bonds | | | |
| Cash equivalents | | | |

## >> Investment:

For cash equivalents investment, please indicate the amount as well as the start and maturity dates:

| | Amount | Start Date | Maturity Date |
|---|---|---|---|
| T-bills | | | |
| Fixed Deposit | | | |
| Call Account | | | |

## >> Knowledge, experience and understanding

We may deal in or recommend different types of investment, and some of these may be unfamiliar. We recommend that you discuss with our investment manager who will outline various risks involved in some of these investments. Please indicate below whether you have an understanding and/or experience of investing in the following assets or complex instruments.

| | **None** | **Limited** | **Medium** | **Extensive** |
|---|---|---|---|---|
| **Collective Investment Scheme** | | | | |
| **Private Equity Funds** | | | | |
| **Equity Fund** | | | | |
| **Bond Fund** | | | | |

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## Section 6

### >> Confirmation of Investment Policy – To be signed by the Policyholder(s)

I/We request that the investment objectives are as set out on section 3 above. I/We confirm that all the information in this form is accurate and can be depended upon.

I/We confirm notification of the fee arrangement, charged as……………per .annum of the total funds under management, which has been agreed with the provider.

(Please note that fees are charged half yearly in arrears or agreed otherwise).

| | |
|---|---|
| **Signature & Date** | |
| **Print full name** | |
| **Signature & Date** | |
| **Print full name** | |

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>> Internal Use Only

## Investment Mandate Sign Off:

| | | | | | | |
|---|---|---|---|---|---|---|
| **Investment Officer** | | | | | | |
| **Investment Classification** | **Retail** | | **Professional** | | **Institution** | |
| **DPS/MPS Objective:** | **Growth** | | **Balanced** | | **Income** | |
| **Benchmark** | | | | | | |
| **Signed** | | | **Dated** | | | |

## Compliance

| | |
|---|---|
| **AML documentation in order** | |
| **Client Screening Completed** | |

| | | | |
|---|---|---|---|
| **Signed** | | **Date** | |