



UPDATE OF PERSONAL DETAILS REQUEST 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.
- Update of Personal Details Request Form received after the 20th of each month will be processed the following month.
- Completed forms must be faxed to 012 315 5675 or emailed to queries@rsaretailbonds.gov.za
- Should you have any queries regarding this form, please contact us on 012 315 5888.

PLEASE WRITE THE DETAILS IN BLACK AND WHERE APPLICABLE IN CAPITAL LETTERS.

PERSONAL DETAILS* (Mandatory)			
Surname:	Full Name:		
Contact Number:	Email Address:		
ID Number:	Investor Number:		
NEW INVESTOR DETAILS* (Only complete details that are being changed)			
New Surname:	New Name(Full):		
ID Number:			
*a certified copy of the new ID book or Card and/or a certified confirmation of change of name issued by Department of Home Affairs and/or a certified copy of a marriage certificate or an abridged birth certificate / or any proof of change of name.			
New Physical Address:			
	Postal Code:		
New Postal Address:			
	Postal Code:		
New Cell: New Tel No. (w): New Tel No. (w):			
New Tel No. (h) Email Address:			
Preferred Method of Correspondence: Post Email New Tax Number			
Old Bank Account Details: Only complete when changing banking details.			
Account Holder Name:			
Bank Name:	Account No.		
Type of Account: Bran	ch Name: Branch Code:		





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New Bank Account Details:			
*Stamped banking details not older than 3 months (Ban	nk statement, bank accoun	t confirmation letter).	
Account Holder Name:			
Bank Name:	Account No		
Type of Account: Branc	h Name:	Branch Code:	
SUPPORTING DOCUMENTATION (check if all required documents are attached when sending this form and tick the relevant box on the below list).			
* This form will not be accepted or processed without a certified ID Copy and proof of residence. Please note that additional documents may be requested			
Certified ID Copy (not older than 3 months)			
Proof of Address not older than 3 months (Utility bill, affidavit, telephone account statement)			
A certified confirmation of change of name issued by Department of Home Affairs.			
A certified copy of a marriage certificate (not older than 3 months)			
Stamped banking details not older than 3 months (Bank statement, bank account confirmation letter)			
Certified Birth Certificate not older than 3 month	hs (If investment belongs to	o a minor)	
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 acco	ording 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 Y M M D D	
GUARDIAN OR PARENT/ POWER OF ATTORNEY			
If you are acting on behalf of another person (either a fields in full, and if you are not a legal guardian of a m certified by a Commissioner of Oaths with all FICA do	ninor child and not a parer	·	
ID Number:			
Full Names and Surname:	Signature:	Date: Y Y Y M M D D	