



DTT PRIME SAVINGS PLANS

Application Form

Application Form

PROMO CODE:

1. TYPE OF PLAN

- EDUCATION SAVINGS PLAN (INDIVIDUAL) EDUCATION SAVINGS PLAN + LIFE INSURANCE (INDIVIDUAL)
 EDUCATION SAVINGS PLAN (FAMILY) EDUCATION SAVINGS PLAN + LIFE INSURANCE (FAMILY)
 RETIREMENT SAVINGS PLAN (INDIVIDUAL) RETIREMENT SAVINGS PLAN (FAMILY)

2. SUBSCRIBER INFORMATION

ACCOUNT NO.:

(TO BE ADDED BY DIRECT TT)

Mr. Mrs. Ms.

SURNAME:

FIRST NAME:

MIDDLE NAME:

ADDRESS:

CITY:

COUNTRY:

HOME NO.:

MOBILE NO.:

BUSINESS NO.:

EMAIL:

PASSPORT NO.:

ID NO.:

NATIONALITY:

DATE OF BIRTH:

DAY MONTH YEAR

PASSPORT AND ID COPIES ATTACHED

3. BENEFICIARY INFORMATION

SURNAME:

FIRST NAME:

MIDDLE NAME:

RELATION TO SUBSCRIBER:

GENDER:

MALE

FEMALE

ADDRESS:

CITY:

COUNTRY:

3. BENEFICIARY INFORMATION – CONTINUED

HOME NO.:	<input type="text"/>	MOBILE NO.:	<input type="text"/>	
BUSINESS NO.:	<input type="text"/>	EMAIL:	<input type="text"/>	
PASSPORT NO.:	<input type="text"/>	ID NO.:	<input type="text"/>	
NATIONALITY:	<input type="text"/>	DATE OF BIRTH:	<input type="text"/>	
		DAY	MONTH	YEAR

PASSPORT AND ID COPIES ATTACHED

BENEFICIARY INFORMATION 2 – APPLICABLE TO FAMILY PLAN ONLY

SURNAME:	<input type="text"/>	FIRST NAME:	<input type="text"/>	
MIDDLE NAME:	<input type="text"/>			
RELATION TO SUBSCRIBER:	<input type="text"/>	GENDER:	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
ADDRESS:	<input type="text"/>			
CITY:	<input type="text"/>	COUNTRY:	<input type="text"/>	
HOME NO.:	<input type="text"/>	MOBILE NO.:	<input type="text"/>	
BUSINESS NO.:	<input type="text"/>	EMAIL:	<input type="text"/>	
PASSPORT NO.:	<input type="text"/>	ID NO.:	<input type="text"/>	
NATIONALITY:	<input type="text"/>	DATE OF BIRTH:	<input type="text"/>	
		DAY	MONTH	YEAR

PASSPORT AND ID COPIES ATTACHED

4. SAVINGS PLAN DETAILS

PLEASE PROCESS MY CREDIT/DEBIT CARD FOR MY MONTHLY CONTRIBUTION

START DATE:

DAY MONTH YEAR

END DATE:

DAY MONTH YEAR

4. SAVINGS PLAN DETAILS – CONTINUED

MONTHLY INSTALLMENT (USD)	FREQUENCY	PLAN TENOR (YEARS)	TOTAL CONTRIBUTION (USD)
	MONTHLY		

5. CREDIT/DEBIT CARD INFORMATION

MASTERCARD VISA AMEX

NAME (as it appears on the card)

CARD NUMBER (no dashes or spaces)

EXPIRATION DATE

--	--	--	--	--	--

DAY MONTH YEAR

SECURITY CODE (CVC):

CREDIT/DEBIT CARD COPY ATTACHED

6 AUTHORIZATION

I certify that the information contained in this Application is true and complete and that I have read and agree to comply with the applicable terms and conditions stated in this Application.

The undersigned hereby applies to DTT NZD Limited to invest my contributions stated in Section 4 on my behalf and understand that these transactions are made under the terms and conditions stated in Section 7.

SUBSCRIBER'S FULL NAME

DATE

SUBSCRIBER'S SIGNATURE

AUTHORIZED SIGNATURE OF ACCEPTANCE
This application is accepted by DTT NZD Limited.

7. TERMS AND CONDITIONS

These terms and conditions, together with the application, constitute a contract entered into between DTT NZD Limited (the "Promoter"), as Promoter of the Plan, and either one individual or an individual and his or her spouse (the "Subscriber"), or a Public Primary Caregiver, under which the Promoter agrees to pay or to cause to be paid Educational or retirement Assistance Payments to or for a Beneficiary.

7.1 LIMITATION OF LIABILITY AND INDEMNITY

- It is expressly understood that all investments made by the Promoter will be for the benefit of and at the risk of the Subscriber under the Plan. The Promoter shall not be responsible for any loss suffered by the Plan, by the Subscriber or by the Beneficiary as a result of the purchase, sale or retention of any investment, whether or not the Promoter has communicated to the Subscriber any information the Promoter may have received or any judgment the Promoter may have formed with respect to the value or the security of such investment at any particular time or in the future.
- The Promoter shall not be liable in its personal capacity for and in respect of any taxes, interest or penalties which may be imposed on the Promoter in respect of the Plan or in respect of any other charges levied or imposed by governmental authority upon or in respect of the Plan.
- The Promoter shall not be responsible for any act, omission, default, error, fraud, failure or misconduct of any agent, employee or other person whom they may reasonably engage in the exercise of the powers conferred on them hereunder. In addition, the Promoter shall not be liable in respect of any loss or diminution of Assets of the Plan or any other loss or damages suffered or incurred by the Plan, the Subscriber or by the Beneficiary under the Plan occasioned by an act, omission or default of the Promoter, unless caused by or resulting from its own dishonesty, bad faith, willful misconduct or gross negligence. The Promoter will be fully protected in acting upon any instrument, certificate, notice or other writing believed by them to be genuine and to be signed or presented by the proper person and the Trustee and the Promoter will be under no duty to make any investigation or inquiry as to any statement contained in any such writing but may accept the same as conclusive evidence of the truth and accuracy of any statement contained therein.

7.2 OPT-OUT AND REFUNDS

- The Subscriber shall agree to the Promoter's refund and payback terms in section 7.2.1 in case the Subscriber decided to opt-out and terminate the plan prior to maturity date.
- Payback payment will be executed through a bank-to-bank transfer.

7.2.1 OPT-OUT PAYBACK DETAILS

EDUCATION		RETIREMENT	
YEARS COMPLETED	PAYBACK	YEARS COMPLETED	PAYBACK
0 – 2	60% of Premium	0 – 2	60% of Premium
2 – 5	75% of Premium	2 – 5	75% of Premium
5 – 10	90% of Premium	5 – 10	90% of Premium
10 – 14	100% of Premium + 25% of Profit	10 – 15	100% of Premium + 25% of Profit
14 – 16	100% of Premium + 46% of Profit	15 – 19	100% of Premium + 46% of Profit
17 (Tenor Completion)	100% of Premium + 100% of Profit	20 (Tenor Completion)	100% of Premium + 100% of Profit

7.3 FEES & EXPENSES

- The Promoter will charge a yearly expense and management fee of 1.7 %, paid quarterly.

7.4 INSTALLMENTS

- The Subscriber's credit or debit card will be charged as per the amount and frequency specified within the Application.
- Should the Subscriber wish to make the installments through a bank-to-bank transfer, charges will be incurred by the Subscriber.

7.5 SUBSCRIBER'S DEATH AND LIFE INSURANCE

The below terms are applicable only to Educations Savings Plans with Life Insurance option.

- If the Subscriber dies within two years, the Beneficiary will not be entitled to life insurance returns.

- If the Subscriber dies after two years and prior to the Termination Date, the Promoter will be covering the payments on behalf of the ultimate beneficiary until the maturity of the plan.
- If the Subscriber is terminally ill during the purchase of the plan, life insurance shall not be applicable.

7.6 PAYMENT DEFAULTS

- The Subscriber shall commit to the payment terms and frequency specified within this plan. The plan will be considered terminated if the Subscriber defaults on any payment.
- In the case of defaults and termination of the plan, payback terms will be as specified in section 7.2.1.
- In case the Subscriber defaults on payments and requests a grace period, the ultimate decision is the Promoter's and the Promoter reserves the right to assess the situation and advise the Subscriber accordingly.

7.7 RESPONSIBILITY FOR THE PLAN

- The Promoter has ultimate responsibility for the Plan; specifically, the Promoter is responsible for the type of investments made on behalf of the Subscriber.
- Investments are based on US Top 500 performing publicly listed companies. It is expressly understood that previous historical results are not an indication of future performance.

7.8 AMENDMENTS

- The Promoter may change this Agreement from time to time with the agreement of regulatory authorities, if required. If it does so, The Promoter will give you 30 days' notice in writing. If The Promoter has to amend this Agreement because of changes to the Applicable Tax Legislation or other applicable legislation, it will do so automatically, and The Promoter will not be required to tell you about the change before it becomes effective.

8. OUR PRIVACY POLICY

- DTT NZD Limited is committed to providing clients with the highest standard of service. As part of our commitment, we protect your privacy and the confidentiality of personal information that you provide to us. Our internal code of ethics requires all employees of DTT NZD Limited to maintain client confidentiality.
- Personal information refers to information that identifies you. It may include information such as your birth date, marital status, ID number, account holdings and transactions, banking information, beneficiary name, home address, personal email address, home telephone number and the name, address and ID number of your family.
- We are not in the business of selling or distributing our investor's personal information to others. We may only use your personal to identify you; to ensure our records are accurate; to establish and administer your account; to execute your transactions; to maintain, store, record and determine your account holdings and transaction records; to verify previously given information when necessary; to provide you and your financial advisor with account statements, financial statements for your investments, transaction confirmations and other information that may be requested or needed to service your account; to provide you with quality customer service and support on your investment needs; and to meet legal and regulatory requirements. If you wish to change or update your personal information, you may request to do so at any time.