

**APPLICATION FORM FOR PURCHASES OF UNITS (GROUPS)  
PEPA TALOSAGA MO LE FAATAUINA O IUNITE (FAALAPOTOPOTOGA)**

Type of Group / *Ituaiga Faalapotopotoga*

Date / *Aso*:

Unit Register Name / *Suafa e Resitala ai Iunite*

**1. Applicant 1**  
*Fai Talosaga 1*

[First name (s) / *Suafa muamua*]

[Last name / *Faaiu*]

[Date of Birth / *Aso fanau*]

[Nationality / *Tagata nuu*]

[Residential address / *Alalafaga*]

[Postal address / *Tuatusi o le Falemeli*]

[Email / *Imeli*]

[Telephone / *Telefoni*]

**2. Applicant 2**  
*Fai Talosaga 2*

[First name (s) / *Suafa muamua*]

[Last name / *Faaiu*]

[Date of Birth / *Aso fanau*]

[Nationality / *Tagata nuu*]

[Residential address / *Alalafaga*]

[Postal address / *Tuatusi o le Falemeli*]

[Email / *Imeli*]

[Telephone / *Telefoni*]

**3. Applicant 3**  
*Fai Talosaga 3*

[First name (s) / *Suafa muamua*]

[Last name / *Faaiu*]

[Date of Birth / *Aso fanau*]

[Nationality / *Tagata nuu*]

[Residential address / *Alalafaga*]

[Postal address / *Tuatusi o le Falemeli*]

[Email / *Imeli*]

[Telephone / *Telefoni*]

**4. Source of Income**  
*Alagatupe*

5. Conditions of Unit withdraw / Aiaiga o le talaina o lunite

- Any applicant to sign for withdraw/ Toatasi le fai talosaga e saina I le talaina o lunite.
- All applicants to sign for withdraw/ Manaomia le saina uma le au fai talosaga e tala ai lunite.

Note of condition/Faamatalaina o aiaiga o le toetalaiga I tua o lunite.

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DECLARATION AND SIGNATURES: I/We hereby apply to purchase the above mentioned Units on behalf of the above applicants, and I/We am/are over 18 years of age. I/We declare that I/We have read and agree with the **'Declaration, Conditions and Acknowledgements'** provided below. I/We hereby agree to receive all distributions under name of the first Applicant.

*FEAGAIGA MA SAINIGALIMA: Ua ou/maua talosagaina le faatauina mai o lunite e pei ona taua i luga, ma o a'u/maua ua silia ma le 18 tausaga. Ua mae'a ona ou/ma faitauina ma faamaonia "Tautinoga, Aiaiga ma Faamatalaga o le Taliaina" o lo'o tu'uina atu i lalo. Ua ou/maua malie faatasi e totogi uma atu tupe maua mai iunite i le suafa o le Fai Talosaga 1.*

**DECLARATION, CONDITIONS AND ACKNOWLEDGEMENTS**

By completing the application form, you as an Investor agree to be bound by all the provisions in the full prospectus including the following:

- Agree to be bound by the provisions of this prospectus and the applicable Trust Deed (as amended from time to time)
- Consent to the Manager providing your adviser and their agent(s) with investment details.
- Agree to meet any bank fees and other like charges incurred as a result of a withdrawal by way of telegraphic transfer, bank cheque or some other special payment method (including direct debits).

**Acknowledge that:**

- Unit Trust of Samoa (Management) Limited is the responsible entity and Manager of the Trust
- The holding of units in the Trust is subject to investment and other risks. This could involve delays in repayment and loss of income or principal invested.
- If your minimum balance falls below 50 units the Manager can, at its discretion, redeem the balance of your investment and pay the proceeds to you.
- The Manager has the right to reject any applications received.

**I/We declare that:**

- All details provided in this Application Form are true and correct.
- I/We have read the prospectus to which this application applies and agree to be bound by the provisions of the Trust Deed (as amended from time to time) governing UTOS.
- I/We have legal power to invest in accordance with this application.
- In the case of joint applications, the joint applicants agree that the units will be held as joint tenants. Each investor must sign an instruction to the Manager to operate the account including additional applications and withdrawals.

If this Application Form is signed under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of that power. (A certified copy of the Power of Attorney should be submitted with this application for our records).

6. Applicant (s) signatures / Saini o lē (ē) e Talosaga:



**Applicant 1 / Fai Talosaga 1**



**Applicant 2 / Fai Talosaga 2**



**Applicant 3 / Fai Talosaga 3**

<b>OFFICICE USE ONLY</b>	
Prepared & load by: _____	Date: _____
Approved by: _____	Date: _____