# PROTECTION OF PERSONAL INFORMATION ACT OF 2013

## POWER OF ATTORNEY

TO WHOM IT MAY CONCERN:

That I, _____

**Identity number** _____

the undersigned,

Do hereby nominate, constitute, and appoint. _____

**Identity number** _____

I hereby grant power of attorney to the nominee to request and receive the following personal information from Paarl African Advisory and / or Paarl African Trust (Paarl African Group) on my behalf:

☐ Tax Certificates ☐ Investment Portfolio ☐ Life Insurance portfolio

☐ Medical and Gap Cover portfolio ☐ Copy of my Will ☐ Copy of my Trust deed(s)

☐ Other documents or information (Please specify) _____

_____

_____

_____

This authority will remain valid until I cancel it in writing with Paarl African Group.

THUS, DONE and EXECUTED at _____ on _____

_____
CLIENT

_____
PROXY