



REPUBLIC OF SOUTH AFRICA

UNDERTAKING BY AUDITOR/ACCOUNTANT (Inter-Vivos Trust)

I (Full names and surname) .....

ID/ Passport No: [grid of boxes]

Representative of Organisation (If Applicable) .....

Registration Number (If Applicable) .....

Accreditation Body: .....

Accreditation Registration No .....

Hereby undertake to act as Auditor/Accountant of the Trust known as: .....

I choose the following address:

Domicillium Citandi et executandi (physical address)

Postal Address

..... Tel: ..... Cell: ..... E-mail: .....

DECLARATION AND UNDERTAKING

I am qualified to act as Auditor/Accountant of the above Trust and undertake to advise the Master:

- Should I cease to act in the above Trust Yes [ ]
The name of the new Auditor/Accountant should I be aware thereof Yes [ ]
Should there be any changes in the capital/income beneficiaries in this trust Yes [ ]
Should the Trust not have been administered in accordance with the terms and conditions of the trust deed Yes [ ]
Of any substantial addition, to the capital and assets of the trust and value thereof Yes [ ]

Provide reason if any of the above could NOT be answered Yes: .....

Date

Signature of Auditor/Accountant