

*Information Required*  
**FOR THE FORMATION OF  
AN INTER VIVOS TRUST**

**A**

**PROPOSED NAME OF TRUST**

\_\_\_\_\_

**B**

**FOUNDER**

Full Names \_\_\_\_\_

ID No. (Please furnish copy of ID book or card) \_\_\_\_\_

Nationality \_\_\_\_\_  
(If not RSA resident - Passport No. - Please furnish copy)

Residential Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postal Address \_\_\_\_\_  
\_\_\_\_\_

Occupation \_\_\_\_\_

Telephone No. (h) \_\_\_\_\_ (b) \_\_\_\_\_  
(cell) \_\_\_\_\_

Email Address \_\_\_\_\_

**C**

**TRUSTEE**

Yes No

Independent Trustee, i.e. not related to any beneficiaries or trustees

Full Names \_\_\_\_\_

ID No. (Please furnish copy of ID book or card) \_\_\_\_\_

Nationality \_\_\_\_\_  
(If not RSA resident - Passport No. - Please furnish copy)

Residential Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postal Address \_\_\_\_\_  
\_\_\_\_\_

Occupation \_\_\_\_\_

Telephone No. (h) \_\_\_\_\_ (b) \_\_\_\_\_  
(cell) \_\_\_\_\_

Email Address \_\_\_\_\_

*Information Required*  
**FOR THE FORMATION OF  
AN INTER VIVOS TRUST**

**D**

**TRUSTEE**

Yes No

Independent Trustee, i.e. not related to any beneficiaries or trustees

Full Names \_\_\_\_\_

ID No. (Please furnish copy of ID book or card) \_\_\_\_\_

Nationality \_\_\_\_\_  
(If not RSA resident - Passport No. - Please furnish copy)

Residential Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postal Address \_\_\_\_\_  
\_\_\_\_\_

Occupation \_\_\_\_\_

Telephone No. (h) \_\_\_\_\_ (b) \_\_\_\_\_  
(cell) \_\_\_\_\_

Email Address \_\_\_\_\_  
\_\_\_\_\_

**E**

**TRUSTEE**

Yes No

Independent Trustee, i.e. not related to any beneficiaries or trustees

Full Names \_\_\_\_\_

ID No. (Please furnish copy of ID book or card) \_\_\_\_\_

Nationality \_\_\_\_\_  
(If not RSA resident - Passport No. - Please furnish copy)

Residential Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postal Address \_\_\_\_\_  
\_\_\_\_\_

Occupation \_\_\_\_\_

Telephone No. (h) \_\_\_\_\_ (b) \_\_\_\_\_  
(cell) \_\_\_\_\_

Email Address \_\_\_\_\_  
\_\_\_\_\_

*Information Required*  
**FOR THE FORMATION OF  
AN INTER VIVOS TRUST**

**F**

### FURTHER TRUSTEES

Please furnish the same information as for the first, second and third Trustees.

\_\_\_\_\_

**G**

### AUDITOR'S DETAILS (IF APPLICABLE)

Auditor \_\_\_\_\_

Postal Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Reference \_\_\_\_\_

Date of Year End \_\_\_\_\_

\_\_\_\_\_

**H**

### BENEFICIARIES

Please complete where applicable:

Spouse of a Trustee      Yes    No  
     

Full names \_\_\_\_\_

Children of a Trustee (if children are to be named)      Yes    No  
     

Full names \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Children of a Trustee as a class, i.e not named so that deed does not have to be amended to include further children (this will include legally adopted children and illegitimate children who have not been legally adopted by a third party)      Yes    No

    

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Information Required*  
**FOR THE FORMATION OF  
AN INTER VIVOS TRUST**

**H**

**BENEFICIARIES (CONTINUED)**

Please complete where applicable:

Descendants of children of a Trustee – these may be individually named or referred to as a class Yes  No

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other beneficiaries

Please furnish full names of each beneficiary and specify the relationship of each beneficiary to the Founder

Yes  No  \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please furnish us with copies of the beneficiaries Id books/ cards / birth certificates.

Please note the following regarding the appointment of Trustees:

1. If the trust will be operating as a family trust the Master of the High Court will require that one of the Trustees be a fully independent party, i.e not related to the beneficiaries in any way whatsoever. It is recommended that this independent trustee is a professional person, such as an accountant or attorney.
2. It is preferable to have an uneven number of Trustees.

For more information, contact us at [estates@stbb.co.za](mailto:estates@stbb.co.za)