



INSTRUCTION LETTER - REGARDING THE MEMBER'S RESPECTIVE MODULE/WEEK ANNUAL ARRANGEMENTS REGARDING OCCUPATION, UPDATE OF PERSONAL INFORMATION AND PAYMENT INSTRUCTIONS

I / WE, the various persons listed below (hereinafter referred to as "we") confirm that we have carefully perused this document and request the *Managing Agent* to update our information regarding our portfolio as provided herein and furthermore we herewith require the *Managing Agent* to give effect to our instructions as stipulated herein:

| 1. | | AL INFORMATION UPDATE | | | | | | |
|-----|-----------|--|---------------|--|-----------|---------------------|--|--|
| 1.1 | Name(s) | and Surname (or) Company Name: | | | | | | |
| | | | | | | | | |
| 1.2 | Identity | No(s) (or) Company Reg No: | | | | | | |
| | | | | | | | | |
| 1.3 | Telepho | ne Number(s): (H) () | | (W) () | | | | |
| 1.4 | Cell pho | ne number(s): 1. | | | | | | |
| 1.5 | Fax Num | mber(s): 1 2 | | | | | | |
| 1.6 | E-mail(s) | | | | | | | |
| 1.7 | Physical | al (Residential) Address: | | | | | | |
| | | | | Co | | | | |
| 1.8 | | ddress: | | Co | de: | | | |
| 2. | | OF TIMESHARE MODULE(S)/WEEK(S) | | | | | | |
| 2.1 | Resort(s |): | 2.3 | Unit(s)/Chalet(s): | | | | |
| | | | | | | | | |
| 2.2 | Module(| s)/Week(s): | 2.4 | Membership No(s): | | | | |
| _ | OCCUDA | TION INSTRUCTIONS | | | Ontinu(s) | NA o dulo (o) | | |
| 3. | | <u>.TION INSTRUCTIONS</u> elect the relevant option below you wish to pursu | ie and | tick the corresponding box, to | Option(s) | Module(s) / Week(s) | | |
| | | he managing agent to give effect to your occupation i /ant timeshare week(s)/module(s). | nstruc | tions for the year 2021 regarding | | | | |
| | | ote: All space bank requests must be submitted at lea | ast 12 | days prior to occupation date. | | | | |
| | | No instructions can be actioned, unless your full | levy a | ccount has been paid. | (Tick) | (Specify) | | |
| 3.1 | 3.1.1 | We will occupy the timeshare module/week. | | | | | | |
| 0.1 | 0.1.1 | | | | | | | |
| | 3.1.2 | We authorise the person(s), with further details sti | pulate | d below, to occupy the | | | | |
| | | respective module/week. | | | | | | |
| | 3.1.2.1 | Name(s) and Surname: | | | | | | |
| | | | | | | | | |
| | 3.1.2.2 | Identity No(s): | | | | | | |
| | | | | | | | | |
| | 3.1.2.3 | Contact phone No(s): | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 3.2 | 3.2.1 | Kindly bank our module/week with VRS Options. | | | | | | |
| | 2 2 2 | | | | | | | |
| | 3.2.2 | Kindly bank our module/week with RCI/7Across: (N | viemb | er no:) | | | | |
| 3.3 | 3.3.1 | Kindly place our module/week up for Rental. | | | | | | |
| | 2.2.5 | | | . He i | | | | |
| | 3.3.2 | Kindly place our module/week up for Rental with t | ne Res | ort (If the respective Resort has | | | | |
| | | this option available). | | | | | | |



ı



| 4. | PAYMENT INSTRUCTION | Option(s) | Module(s) | | | | | |
|-------|---|-----------------------------------|------------------------------|----------------------|--|------|--|--|
| | Please select a payme | | / Week(s) | | | | | |
| | intend to settle the | | / WCCK(3) | | | | | |
| | documentation and fo | (Tick) | (Specify) | | | | | |
| 4.1 | We are going to settle | | | | | | | |
| | (Kindly complete anne | xure "A") | | | | | | |
| 4.2 | We are going to settle the annual levy by paying it off in instalments via Debit Order. | | | | | | | |
| | (Kindly complete anne | xure "A") | | | | | | |
| 5. | VERIFICATION | | | | | | | |
| | We hereby confirm that we are the registered holders of the timeshare module(s)/week(s) stated above. | | | | | | | |
| | We confirm that the information contained herein are both true and correct. | | | | | | | |
| | We hereby authorise | the <i>Managing Agent</i> to do t | the necessary to give effect | to our instructions. | | | | |
| 6. | <u>SIGNATURE</u> | | | | | | | |
| | This document is sign | ed at | on the | day of | | _ 20 | | |
| | Member(s) | 1 | 2 | · | | | | |
| | Spouse/Partner | 1 | 2. | | | | | |
| 7. | NOTE: | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| PLE/ | SE RETURN FULLY COM | IPLETED AND SIGNED INSTR | UCTION LETTER, IF APPLICA | BLE, TO | | | | |
| | | | • | | | | | |
| | the contract and the state of the contract of | | | | | | | |
| LIVIA | IL: propertyadmin@vrs | s.co.za | | | | | | |





ANNEXURE "A" - DEBIT ORDER AUTHORISATION (LEVIES)

| Given by (Name of Account Holder): | - <u></u> | | | | | | |
|--|---|---|--|--|--|--|--|
| Address: | | | | | | | |
| Bank | | | Code: | | | | |
| Branch and Code | | | | | | | |
| Account Number | | | | | | | |
| Type of Account | | | | | | | |
| • • | | oh omount mov vorv fra | om time to time in accordance | | | | |
| Amount: | with the Agreement. | ch amount may vary no | om time to time in accordance | | | | |
| Date | (/) | | | | | | |
| To (Name of Beneficiary): Abbreviated Name as Registered with th Beneficiary's address: | Vacation Recreation Reservation VRS | onal Services (Pty) Ltd ark East, Cnr Atterbury | and Jollify Main Road, | | | | |
| This signed Authority and Mandate refe order amount may vary from time to time | | | e Agreement") and which debi | | | | |
| I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our above mentioned account at my/our above-mentioned Bank (or any other Bank or Branch to which I/we may transfer my/our account on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement at commencing on/ and continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing of not less than 20 ordinary working days, and send by prepaid registered post or delivered to your address indicated above. | | | | | | | |
| The individual payment instructions so aut | horised to be issued must be i | ssued and delivered as | follows: monthly. | | | | |
| In the event that the payment day falls automatically be the very next ordinary but | | d South African public | holiday, the payment day wil | | | | |
| I/We understand that the withdrawals he South African Banks. I also understand the contain a number, which must be included Agreement. This number must be added to | hat the details of each withdra I in the said payment instructio | awal will be printed on n and if provided to me | my Bank statement. Such mus should enable me to identify the | | | | |
| B. Mandate I/We acknowledge that all payment instructions have been issued by me/us pe | | pe treated by my/our a | bove-mentioned Bank as if the | | | | |
| C. Cancellation I/We agree that although this Authority Agreement. I/We shall not be entitled to a such amounts were legally owing to you. | | | | | | | |
| D. Assignment I/We acknowledge that this Authority may that third party, but in the absence of such third party. | | | | | | | |
| Signed at | on this | day of | 20 | | | | |
| (Signature as used for operating on the | account) | (Assisted By) | | | | | |
| E. Agreement Reference Number | | | | | | | |
| This Agreement reference/contract numbe which a copy of the contract was provided | | for | r your membership number, | | | | |