



SWORN AFFIDAVIT BY INDEPENDENT TRUSTEE

I (Full names and surname)

ID / Passport No:

Representative of Organisation (If Applicable)

Registration Number (If Applicable)

As independent trustee I declare and undertake the following:

- 1. I am qualified to act as trustee and do not find myself in any of the circumstances mentioned in Section 21(2) of the Trust Property Control Act, 2018 (Act 11 of 2018), which will justify my removal and undertake to inform the Master immediately should any such circumstances arise.
2. I undertake to inform the Master should there be any changes in the capital/income beneficiaries in this Trust.
3. I undertake to furnish the Master, when requested to do so, with any information which the Master may require in connection with the affairs of the Trust.
4. That I have no family relation or connection, blood or other, to any of the existing or proposed Trustees, beneficiaries or founder of the trust.
5. That I am competent to scrutinize and check the conduct of the other appointed trustees who lack a sufficiently independent interest in the observance of substantive and procedural requirements arising from the Trust instrument.
6. I have no reason to conclude or approve transactions that may prove to be invalid, because I am knowledgeable in the law of trusts.
7. That I do not have any interest in the Trust as a beneficiary.
8. That I was never disqualified by the Trust Property Control Act, 2018 from acting as a Trustee

Signed at on the.....day..... Month.....Year.

TRUSTEE

I certify that on theday.....Month..... Year and in my presence the deponent signed the Affidavit and declared that he/she knows and understand the contents hereof, has no objection to taking this oath and considers the oath to be binding on his/her conscience.

COMMISSIONER OF OATH