

NOTIFICATION OF BENEFICIARY BANKING DETAILS

NAME OF RETIREMENT SCHEME

NAME OF EMPLOYER/PAYPOINT

DECEASED MEMBER'S PARTICULARS (please complete in full)

Member's surname																											
Members first names																											
ID / Passport number														Date of birth													
Employee number														Date of death													

BENEFICIARY BANKING DETAILS (please complete in full)

BENEFICIARY 1

ID / Passport number																											
Income tax number														Revenue office													
Country of residence for tax purposes																											

Should the country of your residence for tax purposes not be South Africa, please obtain a Withholding Tax on Interest (WTI) Declaration form from the deceased member's employer. Complete this form and hand it to the deceased member's employer to forward to Alexander Forbes. If the completed form is not received within 30 days of submitting the claim, the full rate of withholding tax on late payment interest will become payable.

Account holder's name																											
Account number																											
Branch code														Account type	Current Savings Transmission												
Name of bank																											
Name of branch																											

BENEFICIARY BANKING DETAILS (please complete in full)

BENEFICIARY 2

ID / Passport number																											
Income tax number														Revenue office													
Country of residence for tax purposes																											

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Account holder's name																											
Account number																											
Branch code														Account type	Current Savings Transmission												
Name of bank																											
Name of branch																											

BENEFICIARY BANKING DETAILS (please complete in full)**BENEFICIARY 3**

ID / Passport number																				
Income tax number									Revenue office											
Country of residence for tax purposes																				
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Account holder's name																				
Account number																				
Branch code					Account type					Current					Savings					Transmission
Name of bank																				
Name of branch																				

BENEFICIARY BANKING DETAILS (please complete in full)**BENEFICIARY 4**

ID / Passport number																				
Income tax number									Revenue office											
Country of residence for tax purposes																				
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Account holder's name																				
Account number																				
Branch code					Account type					Current					Savings					Transmission
Name of bank																				
Name of branch																				

BENEFICIARY BANKING DETAILS (please complete in full)**BENEFICIARY 5**

ID / Passport number																				
Income tax number									Revenue office											
Country of residence for tax purposes																				
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Account holder's name																				
Account number																				
Branch code					Account type					Current					Savings					Transmission
Name of bank																				
Name of branch																				

BENEFICIARY BANKING DETAILS (please complete in full)**BENEFICIARY 6**

ID / Passport number																									
Income tax number									Revenue office																
Country of residence for tax purposes																									
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Account holder's name																									
Account number																									
Branch code									Account type	Current				Savings				Transmission							
Name of bank																									
Name of branch																									

BENEFICIARY BANKING DETAILS (please complete in full)**BENEFICIARY 7**

ID / Passport number																									
Income tax number									Revenue office																
Country of residence for tax purposes																									
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Account holder's name																									
Account number																									
Branch code									Account type	Current				Savings				Transmission							
Name of bank																									
Name of branch																									

BENEFICIARY BANKING DETAILS (please complete in full)**BENEFICIARY 8**

ID / Passport number																									
Income tax number									Revenue office																
Country of residence for tax purposes																									
Should the country of your residence for tax purposes not be South Africa, please obtain a Withholding Tax on Interest (WTI) Declaration form from the deceased member's employer. Complete this form and hand it to the deceased member's employer to forward to Alexander Forbes. If the completed form is not received within 30 days of submitting the claim, the full rate of withholding tax on late payment interest will become payable.																									
Account holder's name																									
Account number																									
Branch code									Account type	Current				Savings				Transmission							
Name of bank																									
Name of branch																									

Completing of the above fields are mandatory including the income tax number which is required by the South African Revenue Services. Settlement of claims will be delayed where the above requirements have not been met.

EMPLOYER’S DECLARATION

It is hereby confirmed and warranted that the beneficiary’s banking details provided herein have been confirmed as correct. The employer hereby unconditionally absolves the fund and Alexander Forbes or its agents and as necessary indemnifies and keeps indemnified the fund and Alexander Forbes and its agents from and against all and any loss, damage, costs and expenses which the beneficiaries, or any other person whatsoever, may sustain or incur, either directly or indirectly as a result of Alexander Forbes or its agents, on behalf of the fund, relying on and using any information supplied by the employer.

Employer’s stamp

Authorised signature _____

Designation _____

Date _____