

Death claim notification form

Fund	
Participating employer	
Surname	
First names	
Date of birth	DD/MM/YYYY
ID number/Passport number if not SA ID	
Date of death	DD/MM/YYYY
Cause of death	
Tax number	
Tax office	

Mandatory requirements

- Certified copy of member's ID
- Certified copy of member's death certificate
- Copies of last 3 months' payslips
- Beneficiary nomination form

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Notes

- The administrator will contact you should more information be required to complete the claim
- A separate claim form must be completed for any insured benefit.

Has any benefit portion been utilised as security for an approved housing loan?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is the member indebted to the fund in terms of Section 37D of the Pension Fund?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is there a Pension Interest payable to an ex-spouse in terms of a court order in terms of the Divorce Act 1989?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Authorised signatory of the employer

Date

Company stamp

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