

NOTIFICATION OF NEW BANKING DETAILS

NAME OF RETIREMENT SCHEME:

NAME OF EMPLOYER/PAYPOINT:

MEMBER'S/PENSIONER'S/BENEFICIARY'S PARTICULARS (please complete in full)

Surname																																
First names																																
Maiden name																																
ID/Passport number											Country of issue			Date of birth	D		D		M		M		Y		Y		Y		Y			
Residential address	Unit number				Complex																											
	Street number				Street/Farm name																											
	Suburb																City/Town															
	Country																Code															
Postal address																																
Telephone numbers	Home	C O D E N U M B E R										Work	C O D E N U M B E R																			
	Cell						E-mail																									
	Employee reference number																Date of exit	D		D		M		M		Y		Y		Y		Y
Income tax number											Revenue office																					

Non-completion of the above may result in a delay in the settlement of this claim.

DOCUMENTATION TO BE ATTACHED

Original certified copy of Identity document Latest original bank statement stamped by Bank or cancelled cheque

CHANGE IN MEMBER'S/PENSIONER'S/BENEFICIARY'S BANKING DETAILS (to be used for the payment of benefits due)

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

Please Note:

* Ensure that the bank account details supplied are in respect of **member's/pensioner's/beneficiary's own account**.

CLAIMANT'S SIGNATURE & DISCHARGE

I confirm further that the details provided herein, in particular the banking details are true and correct in every way. I also confirm that, in the event of any loss suffered as a result of any details provided herein being incorrect, neither the Fund nor Alexander Forbes can be held liable for such losses.

Claimant's signature _____

Date

D	D	M	M	Y	Y	Y	Y
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BANKING INSTITUTION'S CERTIFICATION OF THE ABOVE BANK ACCOUNT DETAILS:

It is hereby confirmed and warranted that the claimant's banking details provided above have been confirmed as correct and that the account is still active. We also confirm that the claimant's Identity Document number held on our records is:

ID number

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Authorised signature _____

Name (Print) _____

Designation _____

Date _____

Important Notes: Complete all the required information and attach the supporting documents. • You must have a valid bank account in your own name in order to be paid and the bank must stamp the form confirming your account details. The original documents must be posted or hand-delivered to Alexander Forbes - use address on this document. • Failure to complete the above in full and timeous return of the completed document may result in a delay in settlement of the claim.