

APPLYING FOR A DIVORCE BENEFIT

The purpose of this document is for you to give us the information that we and the fund need to pay out a benefit in terms of a divorce order.

In this form:

- 'You' refers to the person named on this form as the claimant (the person who is claiming).
- 'The member' refers to the person whose fund you are claiming from.
- 'We' refers to the company in Alexander Forbes that is shown at the top of this form.
- 'The issuer' is Investment Solutions.

ABOUT A DIVORCE BENEFIT

Note that filling out this form does not mean that the fund will pay out the divorce benefit.

If the divorce benefit is approved, you can choose to get the money in cash or to have it paid out to an approved fund.

Before we can decide whether the fund will pay out the benefit, we must review the divorce order to see if the fund can accept it. We will inform you and the member if the fund cannot accept the divorce order.

We will pay the benefit only once we have received the tax directive from SARS. Tax may be deducted according to SARS' requirements.

KEY POINTS TO UNDERSTAND ABOUT THIS FORM

Please read this document carefully, and contact us or your financial adviser if you have any questions. You should sign the form only if you agree to all the terms and conditions in it. The form is part of your contract with us and the issuer. You must make sure that all the information is correct and that all parts of the form are complete. We and the issuer have the right to treat the information given in the form as accurate and complete. If you make changes to what you have already filled in, you must sign next to each change.

DOCUMENTS YOU MUST ATTACH TO THIS FORM

You must attach the original or a certified copy of these documents to this form. We will start to process your application only when we have received all the documents we need.

- The divorce order (court order)
- Your identity document (that is the identity document of the claimant)
- A cancelled cheque or a bank statement showing the account number where the money is to be paid (if you are transferring the benefit to a bank account)
- Application form of the approved fund (if you are transferring the benefit to another approved fund)
- Application form of the investment product (if you are transferring to an investment product)
- An indemnity form (if you are transferring to another person).

If you use a certified copy, you must give us the copy that has been stamped by the Commissioner of Oaths.

FOLLOW THESE STEPS

1. Fill in this form. (Note: You will need to fill out either Section 1 or Section 2.)
2. You must sign the form and date it.
3. Attach the documents listed above.
4. Send the form to us or deliver it to the address shown at the top of the form. Note that we do not accept emailed, scanned or faxed copies of the forms or required documents.

Personal information, privacy and security

Alexander Forbes takes data protection seriously. We comply with legislation that protects data and personal information like the *Protection of Personal Information Act*.

By signing this document, you confirm that you have the necessary permission to provide us with personal or special information about other people or children if required.

We will keep your personal information or share it with third parties to:

- act on your instructions for as long as we, or the fund, need to
- comply with any law that requires it
- communicate with you about our services and products where appropriate

Once we no longer have a need or legal basis to keep your personal information, we will:

- delete it,
- or remove the personal information that identifies you

Please contact us using the details provided **to update or correct your personal information**.

If you believe that we have not complied with data protection laws in handling your personal information, you undertake to resolve any concerns with Alexander Forbes. If you are not satisfied with the outcome of this process, you may **lodge a complaint** with the Information Regulator using the complaints email address:

Complaints email complaints.ir@justice.gov.za

Website <https://www.justice.gov.za/inforeg>

HOW TO CONTACT US

- If you want to ask us if we have your personal information, you can contact us at the email address or telephone number shown at the top of the form.
- If your personal information is incorrect, we will change it if you make us aware of this.
- If you want a record of the personal information we have for you, we might charge you a fee for this. Please contact us to find out what the fee is.

COMPLAINTS

- We would like to hear from you if you have a complaint.
 - You can do so in person at any of our offices, or by phone on 011 669 7026, or by following our complaints process on the website at <http://www.alexanderforbes.co.za/ContactUs/Complaints.aspx>.
-

ABOUT THE MEMBER

Please fill in all the information in section. If there are any changes in the member’s particulars, please write to let us know.

Membership number

Investment number

PERSONAL AND CONTACT DETAILS

Surname

First names

Maiden name

Title

☐ Prof

☐ Dr

☐ Mr

☐ Mrs

☐ Ms

☐ Other

ID or passport number

Country of issue

Date of birth

D

D

M

M

Y

Y

Y

Y

Employee reference number

Date of exit

D

D

M

M

Y

Y

Y

Y

Income tax number

Revenue office

Residential address (this is the address where the member lives most of the time)

Unit number

Complex

Street number

Street or farm name

Suburb

City or town

Country

Code

Postal address

Code

Contact details

Home number

Work number

Cell number

Email

ABOUT YOU (the claimant) (spouse of member)

Please fill in all the information in this section. If there are any changes in your personal particulars, please write to let us know.

A spouse is the person:

- You are (or were) married to under the laws of South Africa, according to the laws of your religion or in a customary union
- You are (or were) living with in a long-term relationship.

PERSONAL AND CONTACT DETAILS

Surname

First names

Maiden name

Title ☐ Prof ☐ Dr ☐ Mr ☐ Mrs ☐ Ms ☐ Other

ID or passport number _____ Country of issue _____ Date of birth _____

ID or passport number

Country of issue

Date of birth

[illegible]

Income tax number

Revenue office

Residential address (this is the address where you live most of the time)

Unit number

Complex

[illegible]

Street number

Street or farm name

Suburb

City or town

[illegible]

Country

Code

[illegible]**Postal address**

Code

Contact details

Home number

Work number

Cell number

Email

You choose to receive correspondence by:

☐ Email (if available) ☐ Post. If we are unable to email correspondence, we will post it.

YOUR DECLARATION

By signing this form, you confirm that:

1. You are the spouse of a member of the fund named above, and that the information given in this form is true and correct.
2. The details that you gave in this form, including the banking details, are correct and complete to the best of your knowledge and belief. You understand that if you or anyone else suffers loss because the information you have given is incomplete or incorrect, Alexander Forbes, the fund and the issuer are not legally responsible for the loss.
3. You understand that tax may be deducted according to SARS requirements.
4. You confirm that you have been informed and understand that payment can be made only when we receive a tax directive from SARS.
5. After the fund has paid the divorce benefit according to your instructions above, you agree that:
 - a. The divorce benefit payment is final.
 - b. The fund has fulfilled its duty to pay the divorce benefit.
 - c. The fund is no longer responsible to you or anyone else (including your dependants or your spouse) for the divorce benefit payment.
 - d. If you or anyone else suffers loss or damages because of your instructions, the fund will not be responsible for those losses or damages.
6. We are not responsible for any loss or damages that result from a delay in processing your instruction if that delay is caused by:
 - a. Your or a third party's actions or failure to act
 - b. Events that are outside our control.

Your full name

Your signature

Date _____

D D M M Y Y Y Y

We own the copyright in this document

We own the copyright in this document
You may not copy, store, retrieve or reproduce this document without our express written permission.