

Please complete in BLOCK LETTERS using black or blue ink.

PLEASE FAX AND THEN POST THE COMPLETED FORM AND SUPPORTING DOCUMENTS TO:

SuperFund Claims Department
Old Mutual SuperFund
PO Box 728
Cape Town 8000
Fax: 0860 383 848

TO BE COMPLETED BY THE NON-MEMBER SPOUSE IN THE EVENT OF A DIVORCE SETTLEMENT CLAIM

Note:

An application by the non-member spouse for the settlement of a divorce award will only be deemed to have been received once all the required documents and information are in the possession of this office.

The following documents must accompany this application (please tick appropriate box):

	Already supplied	Attached	N/A
■ Original certified copy of non-member spouse identity document	<input type="checkbox"/>	<input type="checkbox"/>	
■ Original certified copy of the Divorce Court Order	<input type="checkbox"/>	<input type="checkbox"/>	
■ Original certified copy of any Settlement Agreement that has been made an order of court	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ Application forms for transfer to another approved fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 1 – DETAILS OF MEMBER

1. Scheme name	<input style="width: 100%;" type="text"/>															
2. Scheme code	<input style="width: 100%;" type="text"/>															
3. Reference number	<input style="width: 80%;" type="text"/>															
4. Member full names and surname	<input style="width: 100%;" type="text"/>															
5. Date of birth	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y							
D	D	M	M	Y	Y	Y	Y									
6. ID number	<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>															

SECTION 2 – DETAILS OF NON-MEMBER SPOUSE

Title*	<input style="width: 100%;" type="text"/>	Initials*	<input style="width: 100%;" type="text"/>																															
Surname*	<input style="width: 100%;" type="text"/>																																	
First names*	<input style="width: 100%;" type="text"/>																																	
RSA ID number*	<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																Income tax number*	<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																
Passport number* (if not a South African citizen)	<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																	
Country of issue* of passport	<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																	
Date of marriage*	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	Date of divorce*	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y															
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D	D	M	M	Y	Y	Y	Y																											
Residential address*	Complex number and name <input style="width: 100%;" type="text"/>																																	
	Street number and name <input style="width: 100%;" type="text"/>																																	
	Suburb <input style="width: 200px;" type="text"/>	City/Town <input style="width: 200px;" type="text"/>	Code <input style="width: 100px;" type="text"/>																															
Postal address (complete only if different from residential address)*	<input style="width: 100%;" type="text"/>																																	
			Postal code <input style="width: 100px;" type="text"/>																															
Contact details (at least one contact detail must be supplied)*	Work telephone number Code <table border="1" style="width: 100px; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> No. <table border="1" style="width: 100px; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> Cellphone number <table border="1" style="width: 100px; text-align: center;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																	
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Email	<input style="width: 100%;" type="text"/>																																	

*** Mandatory fields to complete.**

SECTION 3 – PAYMENT OPTIONS

Notes:

- The divorce award may be taken in cash, and/or transferred to another approved pension, provident, pension preservation, provident preservation or retirement annuity fund. Transfer of benefits to a preservation fund can only be to one preservation fund and cannot be split amongst more than one.
- As from 1 March 2012 the non-member is the taxpayer when claiming a divorce award - this applies to all divorce orders, irrespective of the date of divorce.
- Where the divorce order was granted before 13 September 2007, the award is tax-free, whether taken in cash or transferred to another fund. If you transfer the divorce award to another fund, this tax-free award will be taxed when you eventually leave such fund.
- It is strongly recommended that you preserve your benefit. To ensure that you make an informed decision, you should talk to a financial adviser. If you do not have your own financial adviser, contact 0860 388 873 (Sharecall) or email membersupportservices@oldmutual.com.

Benefit Options – select one of these options [indicate choice with a tick (✓)]

- 1. Transfer full benefit to another approved Fund.** Attach copy of proposal or application form.
 Full name of approved Fund:
- 2. Part Cash/Part Transfer**
Insert Cash Amount or percentage required to be encashed.
Please note: Any cash amount requested will be reduced by any tax payable on it.
 R OR %
Transfer the remainder of the benefit to another approved Fund. Attach copy of proposal or application form.
 Full name of approved Fund:
- 3. Cash Lump Sum.** If Cash option elected, complete the Method of Payment option below.

Non-member Spouse’s Bank Account Details (for cash payments) (This must be your own bank account.)

Name of account holder

Bank

Branch name

Account number

Branch code

Type of account (✓) Cheque Savings Transmission

Transfer Scheme Details

Full name of approved Scheme

Type of approved Scheme: Pension Scheme Provident Scheme Retirement Annuity Scheme

Transfer Scheme Contact Person Details

Name and surname

Telephone number Code No.

Fax number Code No.

Email

Transfer Scheme Bank Account Details

Name of account holder

Bank

Branch name

Account number

Branch code

Type of account (✓) Cheque Savings Transmission

Signature of non-member spouse

Date



Old Mutual is a Licensed Financial Services Provider