

Recognition of Transfer between approved Pension, Provident and Retirement Annuity Funds, as defined in Section 1 of the Income Tax act

SECTION A: ON BEHALF OF TRANSFERRING FUND

Particulars of Transferring Fund

Full Name of Fund

FSB Registration No

SARS Approval No

The fund is a **Defined Contribution/Defined Benefit** fund

The fund is a **Provident/Pension/Retirement** fund

Particulars of member

Title

Mr Ms Mrs Dr Prof The Hon

First Name

Surname

Identity/Passport Number

Date of Birth (ddmmyy)

Income Tax Number (if applicable)

Revenue Office

Date of withdrawal from transferring fund

Date of pensionable service (defined benefit fund)

Date of membership of transferring fund

Particulars of benefit to be transferred

Member's gross benefit

Amount of benefit to be transferred

Post-tax member contributions (provident fund, etc)

Details of any portion of gross benefit not being transferred are as follows:

The following restrictions/ conditions apply in respect of the benefit being transferred:

In terms of instructions received from or on behalf of the member the benefit to be transferred is to be applied as follows:

Particulars of contact person

First Name

Surname

Company

Residential Address

Code

Postal Address

Code

Cell Phone Number

Other Contact Number

Email Address

Signature (On behalf of transferring fund) Date (ddmmyyyy)

Print Initials and Surname

Email Address

Statement on behalf of receiving fund

The transfer benefit as set out in (A) (4) will be applied for the benefit of the person specified in (A) (3) of the fund as specified in (B) (1).

If any request is received to deal with the benefit as set out in (A) (4), in any manner other than that set out in (A) (3) or (A) (4), such requests shall not be implemented by the receiving fund without the prior written consent of the transferring fund.

Signature (On behalf of receiving fund)

Date (ddmmyyyy)

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Print Initials and Surname

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