

# FundsAtWork Umbrella Funds

## Temporary postponement of the payment of contributions

- If you participate in both the FundsAtWork Umbrella Pension Fund and the FundsAtWork Umbrella Provident Fund, two separate forms must be completed.
- Please fill in this form in the fields provided. Use the tab key to move from one field to the next.

### Section 1: Employer details

Employer's full registered name	<input type="text"/>		
Employer's registration number	<input type="text"/>		
Employer's address	<input type="text"/>		
	<input type="text"/>	Postal code	<input type="text"/>
Fund group code	<input type="text"/>		
Name of Fund	<input type="text" value="FundsAtWork Umbrella Pension Fund"/>	<input type="text" value="FundsAtWork Umbrella Provident Fund"/>	<input type="text"/>

### Section 2: Required documentation and information

Please provide us with the following documentation (which must be attached to this form):

- Letter from the employer on a company letterhead and signed by an authorised signatory, that includes:
  - a request for the temporary postponement of contributions,
  - the period the temporary postponement of contributions is applied for,
  - an undertaking that no contributions will be deducted from the members' salaries during the temporary postponement of contributions,
  - an undertaking to pay late payment interest and to resume double monthly payments of contributions from the month following the end of the postponement period and until the arrear contributions are paid, and
  - confirmation that all affected members were informed of the employer's request.
- A copy of the communication sent to the affected members.
- An Excel file with all the affected members' mobile numbers and/or email addresses.

### Section 3: Details of affected members and employer option

Carefully consider your financial situation and the requirements under each option before making a selection. It is also recommended that you discuss these options with your scheme's financial adviser.

Affected payrolls (reconciliation points)	<input type="text"/>
Affected categories of members	<input type="text"/>

Option 1 - with insurance benefits	Option 2 - without insurance benefits
Postpone payment of retirement savings contributions but the member continues to enjoy full insurance benefits cover.	Postpone payment of retirement savings contributions and insurance benefit premiums. Members will only be covered for the Family Protector benefit.
Administration fees, commission and insurance premiums will continue to be payable by the employer.	Administration fees and commission will continue to be payable by the employer.

### Section 4: Period of temporary postponement of contributions

Carefully consider your financial situation and the requirements under each of the options above and then indicate your chosen period.

Relief period (months)	<input type="text"/>	
Start date	<input type="text" value="DD - MM - YYYY"/>	End date <input type="text" value="DD - MM - YYYY"/>

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## Section 5: Terms and conditions

- Any outstanding contributions at the start date of the postponement period and if applicable, the late payment interest thereon, must be paid to the Fund before the temporary postponement of contributions application will be considered, or the request for temporary postponement of contributions will be declined.
- The temporary postponement of contributions will only be allowed from a future date and will not be backdated.
- Approval of your temporary postponement of contributions choice as well as the period will be at the sole discretion of the board of trustees of the Fund and will be based on the specific facts of each case as set out in your letter, as well as whether the specific choice and/or period is in the best interest of the affected members.
- The Fund has a duty to send communication to all of your affected members to inform them of your chosen contribution relief arrangement. **Your request will not be considered by the Fund until the Fund has all of the affected members' cellphone numbers and/or email addresses.**
- Should your request for whichever reason be declined, a reason will be provided, whereafter you will be afforded an opportunity to review your request and submit a new relief request form to the Fund. The board of trustees of the Fund will then reconsider your revised request.

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## Section 6: Employer declaration and signature

I,  (full names)  
the authorised signatory of the employer with designation

declare that:

1. All details provided in this form and accompanying documentation are true and correct.
2. The employer will continue to pay all administration costs and commission for the full temporary postponement of contributions period.
3. The employer will not deduct contributions from the members' salaries during the temporary postponement of contributions period.
4. If any of the affected members are retrenched, the retrenchments will not be backdated.
5. Payment of full contributions will resume from the end date of the temporary postponement of contributions period as well as a full month's additional contributions (less the approved insurance premiums, if applicable, and administration costs already paid).
6. The employer will enter into an agreement with the Fund for the payment of the arrear contributions and the payment of late payment interest on the postponed contributions.
7. All the affected members were informed of the employer's request for the temporary postponement of contributions, which included the period and the option chosen by the employer.

Signed at

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Signature</b>						<b>Date</b>			

### Options to sign the form:

1. Print out the form, sign and scan it and send it back via email to both [tania.bakker@momentum.co.za](mailto:tania.bakker@momentum.co.za) and [FAWEmployerSupport@momentum.co.za](mailto:FAWEmployerSupport@momentum.co.za).
2. Place your scanned signature in the signature block.
  - Store your scanned signature in a safe place on your computer.
  - Select the 'comments' tab from your menu in Adobe.
  - Select the 'add stamp' icon.
  - Select custom stamps.
  - Create custom stamps.
  - You can now browse and upload your signature to save it as a custom stamp under 'sign here' in Adobe.
  - You can now go back to your 'stamps' icon and select 'sign here' and select your saved signature.
  - Place it in the document and save the document.

When you want to print the form to complete by hand you can turn off the field highlights by selecting the "highlight existing fields" on the top right-hand corner of your screen.