

**FundsAtWork Provident Umbrella Fund retirement form:
members who did not opt-in to the two-pot system
(normal, early, ill health, or late retirement)**

Member number

Attach a copy of your ID/passport (if you have an identity card, submit a copy of the front and back of the card).

Please fill in this form in the fields provided. Use the tab key to move from one field to the next.

Section 1: Member details (member completes this section)

Employer name

Employee number

Title Initial(s)

First name(s)

Surname

Date of birth - -

ID/passport number

Passport country of origin

Cellphone number

Residential address

Unit number Complex (if applicable)

Street number Street/farm name

Suburb/district

City/town Postal code

Postal address

Unit number Complex (if applicable)

Street number Street/farm name

Suburb/district

City/town Postal code

Email address

Alternative email address

Tax number

Did you render any services outside of SA during your working career? Yes No

If yes, please complete this section:

From	To	Employer
<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
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Section 2: Retirement details (employer completes this section)

Reason for retirement

Normal retirement

Early retirement

Late retirement

Ill health retirement

(proof of the employer's request to retire must be attached)

Last day of employment - -

Section 3: Indebtedness to the employer (employer completes this section)

If the member caused damages to the employer according to section 37D of the Pension Funds Act, indicate amount to be deducted and provide proof of the court order or the written admission of liability by the member.

R	<input type="text"/>
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If the employer provided a home loan to the member as mentioned in section 19(5)(a) of the Pension Funds Act, indicate the amount to be deducted for the outstanding home loan and provide proof of the home loan agreement.

R	<input type="text"/>
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Section 4: Court order deductions (member completes this section)

Is there a maintenance order where the Fund is ordered to deduct a maintenance amount from your retirement savings in favour of a maintenance claimant? If yes, please provide a copy of the maintenance order.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Is there a divorce order where the Fund is ordered to deduct a portion from your retirement savings in favour of your non-member spouse? If yes, please provide a copy of the divorce order and the settlement agreement, if applicable, and complete the divorce order form.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Section 5a: Retirement benefit options (member completes this section)

Postpone payment of my retirement savings

My retirement savings must remain invested in the Fund. When you are ready to take your retirement savings from the Fund, complete form FAW046.

Transfer my whole retirement savings from the Fund to the Momentum Retirement Annuity Fund or to another retirement annuity fund (complete section 5d).

Transfer my whole retirement savings from the Fund to the Momentum Corporate Pension Preservation Fund or the Momentum Corporate Provident Preservation Fund or to another preservation fund (complete section 5d).

Buy an annuity with my whole retirement savings (complete section 5c).

Take as cash the whole or any portion of my retirement savings and buy an annuity with the balance, if any (complete sections 5b and 5c).

Amount or percentage of your retirement savings you want to take as a lump sum

R	<input type="text"/>	or	<input type="text"/>	%
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Section 5b: Existing bank account details if cash was selected (member completes this section)

Name of account holder (member)

Account number

Name of bank/building society

Branch name

Branch code

Account type

Current/cheque	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Transmission	<input type="checkbox"/>
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Section 5c: Insurer's details to buy an annuity (member completes this section)

Option 1: I want to buy the Momentum Golden Income With-Profit Annuity

The trustees of the Fund selected this annuity as their annuity strategy for the members.

Option 2: I want to buy another annuity

If you choose this option, include these details.

Name of insurer

Contact person

Contact number

Email address

Account holder

Account number

Bank name

Branch name

Branch code

Account type

Current/cheque	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Transmission	<input type="checkbox"/>
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Financial adviser's name	<input type="text"/>
Cellphone number	<input type="text"/>
Email address	<input type="text"/>

Section 5d: Transfer details if you selected a transfer (member completes this section)

Name of receiving fund	<input type="text"/>
Financial adviser's name	<input type="text"/>
Financial adviser's code	<input type="text"/>
Cellphone number	<input type="text"/>
Email address	<input type="text"/>

Section 6: Declaration by employer's authorised signatory

I, (full names)

declare that all particulars provided in this form and accompanying documentation are true and correct. I confirm that the reason for retirement is as I stated in section 2. I undertake to carry any expenses incurred or damages caused because of incorrect information provided by me on this form.

Signed at

Designation

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signed on behalf of the employer						Date			

Section 7: Declaration by member

I, (full names)

declare that:

- All information provided in this form is true and correct.
- I understand that if my bank details are incomplete or incorrect, the payment of any lump sum retirement benefit will be delayed.
- Payment by electronic transfer will constitute full and final settlement, discharging the Fund and its administrator, Momentum Corporate, of liability in terms of the rules of the Fund.
- The retirement options available to me, as well as the tax implications, have been explained to me in full.
- After looking for the relevant financial advice, the choices indicated in this form are my final instructions and I acknowledge that I am aware that my retirement option will be subject to the rules of the Fund and relevant legislation.
- I have read all the notes in section 8.

I indemnify the Fund and its administrator, Momentum Corporate, against any claim, loss and/or damage that may arise from executing the choices in this form.

I agree that the Fund and its administrator, Momentum Corporate, may process all information that I provide on this form. I understand that they will process my information in line with the Protection of Personal Information Act, 2013, and the Fund and Momentum Corporate's strict policies on protecting the confidentiality of my personal information.

[Click here to read the Fund's Privacy Notice.](#)

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"/>
Member's signature						Date			

Section 8: Notes on retirement

- Cash lump sums may be taxed.
- While we process your retirement claim, we will place your retirement benefit in the Fund's bank account to eliminate the possibility of it reducing because of volatile market conditions.
- If you choose to postpone the date on which you want to start receiving your retirement benefit and you choose to keep your whole retirement benefit in the Fund, you will:
 - Remain invested in the same investment portfolio(s) you were in as an active member but will be able to switch to any one of the other investment portfolios that are available in the Fund.
 - Not be eligible for any insurance benefits.
 - Not make any further contributions towards the Fund.
 - Not pay any administration fees because you are no longer contributing to the Fund.
 - Continue to pay asset management fees, asset-based fees if you invest in external manager portfolios, ie non-Momentum portfolios, and Fund expenses, such as audit and actuarial fees.
 - You must advise the Fund by completing form FAW046 of the date on which you want your retirement benefit to be paid.

Options to sign the form

1. Print out the form, sign and scan it and send it back via email to momentumcorporateclient@momentum.co.za.
2. Place your scanned signature in the signature block by following the steps outlined below.
 - Store your scanned signature as a PDF document 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.