

# Momentum Corporate Preservation Funds Retirement form

Member number

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**Please attach the following documents:**

- A copy of the member's ID / passport (If you have an identity card, please submit a copy of front and back of card).
- If applicable, the new member application form.
- A copy of the member's bank statement not older than three months (no ATM or internet statement will be accepted) or a cancelled cheque.

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

## Section 1: Fund details

Type of fund                      Momentum Corporate Pension Preservation Fund       Momentum Corporate Provident Preservation Fund

Date of retirement                      

D	D	-	M	M	-	Y	Y	Y	Y
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## Section 2: Member details

Title                            Initial/s                            First name                     

Surname                     

Date of birth                      

D	D	-	M	M	-	Y	Y	Y	Y
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RSA ID                      Yes       No       Identity / Passport number                     

Passport country of origin                     

Postal address                     

Residential address                     

Telephone - work                                            Fax                     

Telephone - home                                            Cell phone                     

Email address                     

Tax number                                            Tax Office                     

## Section 3: Outstanding information

For any outstanding information needed by Momentum please contact:

Title                            Initial/s                            First name                     

Surname                     

Telephone - work                                            Fax                     

Telephone - home                                            Cell phone                     

Email address

## Section 4: Retirement options (to be completed by the member)

The options available to members at retirement differ depending on whether you belong to the Pension Preservation or Provident Preservation fund.

If you belong to the Pension Preservation Fund, complete the below Pension Preservation Fund option.

If you belong to the Provident Preservation Fund, complete the below Provident Preservation Fund option.

If you belong to both, complete both the Pension Preservation and Provident Preservation Fund options. Cash withdrawals are subject to income tax.

Pension Preservation Fund	
<input type="checkbox"/>	purchase an annuity with the full benefit;
<input type="checkbox"/>	take up to one third of the benefit in cash and purchase an annuity with the balance. Indicate the rand amount / percentage you want to withdraw in cash R <input type="text"/> or <input type="text"/> %
<input type="checkbox"/>	take the whole retirement benefit in cash (only for benefits less than R247 500).

Provident Preservation Fund	
<input type="checkbox"/>	purchase an annuity with the full benefit;
<input type="checkbox"/>	take a portion of the benefit in cash and purchase an annuity with the balance. Indicate the rand amount / percentage you want to withdraw in cash R <input type="text"/> or <input type="text"/> %
<input type="checkbox"/>	take the whole benefit in cash.

## Section 4a: Existing bank account details (if cash was selected)

Name of account holder (member)	<input type="text"/>		
Name of financial institution	<input type="text"/>		
Account type	Current/Cheque <input type="checkbox"/>	Savings <input type="checkbox"/>	Transmission <input type="checkbox"/>
Account number	<input type="text"/>	Branch code	<input type="text"/> - <input type="text"/> - <input type="text"/>
Member's signature	<input type="text"/>	Date	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - 2 0 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## Section 4b: Annuity details (if an annuity should be purchased)

Name of insurer	<input type="text"/>		
Contact person	<input type="text"/>		
Contact number	<input type="text"/>		
Bank name	<input type="text"/>		
Account number	<input type="text"/>		
Type of account	Current/Cheque <input type="checkbox"/>	Savings <input type="checkbox"/>	Transmission <input type="checkbox"/>
Branch	<input type="text"/>	Branch Code	<input type="text"/> - <input type="text"/> - <input type="text"/>
Financial adviser's name	<input type="text"/>		
Financial adviser's code	<input type="text"/>		
Financial adviser's telephone - work	<input type="text"/>		
Financial adviser's fax - work	<input type="text"/>		
Financial adviser's email address	<input type="text"/>		

### Note:

- While this claim is being processed, the benefit will be placed in Momentum's bank account in order to eliminate the possibility of the benefit being reduced due to volatile market conditions.

## Section 5: Disinvestment effective date

Momentum will start the disinvestment process of your retirement savings account within 7 days of receiving this retirement notification. If you want your retirement savings account to stay invested until the effective retirement date, please tick the box below.

Yes, my retirement savings account should stay invested until the effective date of my retirement.

## Section 6: Declaration by member

I  full names

hereby declare that:

- all particulars furnished in this form are true and correct;
- payment by electronic transfer shall constitute full and final settlement, discharging Momentum of its liability in terms of the Rules of the Fund;
- the benefit payment options available to me, as well as the tax implications thereof, have been explained to me in full; and
- after seeking relevant financial advice, I confirm that the choices indicated here are my final instructions and acknowledge that I am aware that the benefit paid will be subject to the Fund Rules and relevant legislation.

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

I agree that Momentum Corporate may use my personal information to provide and administer retirement fund investment and insurance products and share my personal information with Momentum Corporate's partners and contracted service providers, who are legally bound to protect the information.

[Click here to read the full consent document.](#)

Signed at

<b>Member's signature</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
									2	0	<input type="text"/>	<input type="text"/>

Completed form to be faxed to 012 675 3970 or emailed to [fawpreservationfund@momentum.co.za](mailto:fawpreservationfund@momentum.co.za).

**When you sign this form by inserting a digital signature it confirms that the information provided is true and correct.**

### Options to sign the form:

1. Print out the form, sign and scan it and send it back via email to [fawpreservationfund@momentum.co.za](mailto:fawpreservationfund@momentum.co.za), call 086 055 5572 or fax it to Fax +27 (0)12 675 3970.
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.