7 Disa Street, Extension 8, Lempton Park
Private Bag X36, Kempton Park, 1620
Email: claims@bokamosoretirementfund.co.za
Tel: 011 578 5333

BOKAMOSO RETIEMENT FUND

TWO POT CLAIM FORM

1. PERSONAL DETAILS			
Surname:		Identity Number:	
Name/s:		Employer Name:	
Pension Number:		Job Designation:	
Tax Number:		Employee Number:	
Member's Contact Number:		Date joined Fund:	
Member's E-mail Address:			

Member's Postal Address	Member's Residential Address

2. AMOUNT TO BE WITHDRAWN:	
Amount to be withdrawn	

Disclaimer: The minimum amount that can be withdrawn is R 2 000 and the maximum amount is R 30 000 in the first year (Subject to available balance on your Savings Pot)

Pending Divorce Claim:	

If yes, please provide date of Divorce/Details:

3. BANK ACCOUNT DETAILS	
Name of the account holder:	
Name of Bank:	
Account Type:	
Account Number:	
Branch Code:	

4. DECLARATION BY MEMBER

I hereby confirm that the details contained herein are true and correct in every way, I understand this withdrawal will have tax implications and that I am making an informed choice, in the event of any loss suffered as a result of any details provided by herein being incorrect, neither the Fund nor the Administrator can be held liable for such losses.

I also acknowledge that:

1. The withdrawal is made in terms of the Pension Funds Act as amended as well as the rules of Bokamoso Retirement Fund.
2. I can only make a single withdrawal in a year.
3. I understand fully the implications of this withdrawal on my benefits, in particular the impact on the fund credit.
4. The Fund may charge an administration fee.
5. The withdrawal is subject to applicable tax as specified by SARS.

Surname	
Name/s	
Identity / passport Number	
Date	

MEMBER SIGNATURE

5. DECLARATION BY EMPLOYER REPRESENTATIVE

I hereby declare that all the particulars furnished on this form are true and correct

Surname	
Name/s	
Identity / passport Number	
Employer Contact Details	
Email Address	
Date	

SIGNED ON BEHALF OF EMPLOYER

STAMP OF THE EMPLOYER

6.DOCUMENTATION TO BE ATTACHED TO THIS FORM
Certified copy of Identity document or passport
Proof of banking details
Proof of Tax Number
Proof of Residential Address