

DB5 - APPLICATION FOR REGISTRATION OF A LIFE PARTNER AS A FUND BENEFICIARY

To be completed by employee wishing to register a life partner on the De Beers Pension Fund

Note: Pension Fund members to complete and attach a Beneficiary nomination form (DB2) and a Sworn declaration (DB3) if required

I, the undersigned _____ (full names),

Identity number: _____, De Beers Pension Fund number _____
do hereby state under oath/solemnly declare that:

- ☐ I am an employee of the De Beers group with a Fund number _____
- ☐ I have been cohabiting as if married with the person whose particulars are stated below (spouse/life partner) with the intention to continue doing so on a permanent basis.
- ☐ We have been in a relationship and have been cohabiting from(date
- ☐ I regard the person I am cohabiting with as my spouse/life partner and hereby wish to register him/her as a beneficiary in terms of rules of the Fund
- ☐ In support of my application to register my spouse/life partner, I attach the following (Tick applicable box) –
- A copy of my current Will in which my spouse/life partner has been acknowledged. ☐
 - Affidavit from a close family member/friend confirming our relationship as life partners and the fact that we are co-habiting as spouses. **See note 1**. ☐
 - Affidavit from a religious leader, doctor, lawyer or respected community leader confirming our relationship as spouses/life partners and the fact that we are co-habiting. **See note 2** ☐
 - Any other evidence that supports the existence of the relationship for example:
 - A. Confirmation of children born out of the relationship (Certified copies of full birth certificates attached). ☐
 - B. Certified copies of valid insurance policies where the spouse/life partner has been acknowledged. ☐
 - C. Proof of registration of the spouse/life partner on my medical aid as a spouse/dependant ☐
 - D. Proof of joint property ownership by way of a certified copy of the title deed ☐
 - E. Proof of joint banking accounts by way of certified copies of relevant documentation ☐
 - F. Other affidavits confirming our relationship as life-partners and the fact that we are co-habiting as spouses. **See note 1**
 - G. Proof of joint household accounts by way of certified copies of relevant documentation.
- ☐ My spouse/life partner and I are mutually dependent on each other and we have run a shared and common household at

_____ (physical address)

since _____ (state day, month and year).

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My life partner's particulars are as follows:

Full names: _____

Identity number: _____ Date of birth: _____

Contact telephone number _____

I further undertake to provide the Fund with written notification should the above relationship come to an end and we cease co-habiting. Such notification shall be in the form of an affidavit and shall be sent to the Fund within 30 days after the relationship ends. **See note 3.**

I understand that I will be notified by the Fund if my application has been accepted and my spouse/life partner has been registered as such with the Fund.

I realise that registration of my spouse/life partner is subject to the information in this affidavit being accurate and remaining so.

I accept that this application is not applicable for the registration of my spouse/life partner as a dependant on the De Beers Benefit Society (a separate affidavit is required).

I also accept that the completion of this affidavit does not automatically entitle my spouse/ life partner to a pension benefit in terms of the rules of the Fund and that such entitlement is at the sole discretion of the Trustees of the Fund who will take account of all relevant factors in reaching a decision in this regard and no single factor will be deciding in itself.

Deponent (Member)

Sworn and signed before me at _____ on this _____ day of _____ 20____

by the deponent who declares that he/she read and understood this declaration and regard it as binding on his/her conscience.

Commissioner of Oaths

COMMISSIONER OF OATHS STAMP

Notes:

Note 1 : The affidavit must state the person's relationship to you, how long the person has known you as a couple and that the person making the statements does not stand to gain in any way from making the statement as well as the person's contact details).

Note 2 : The affidavit(s) must contain statements with regards to how long the person has known you as a couple ,the fact that no conflict of interest exists and that those making the statements do not stand to gain in any way from making the statement. Contact details must also be provided.

Note 3 : Please note if a member dies before such notification confirming the termination of the relationship is provided to the Fund, the Board of Trustees of the Fund is entitled to assume that the relationship has continued unless the Fund is provided with evidence contrary to this affidavit. By the same token the Fund reserves the right to re - investigate any particular case and if deemed appropriate, to withdraw it's registration of a beneficiary as provided for in terms of the rules of the Fund.

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BY LIFE PARTNER

I, the undersigned _____ (full names),
Identity number: _____, do hereby state under oath/solemnly declare that:
I have perused the Application for Registration of Life Partner signed and sworn
to/affirmed by _____ (full names of my life partner)
Identity number: _____ on _____ 20_____.
I confirm that the contents thereof are accurate, and I regard him/her as my spouse/life partner

Deponent (Life Partner)

Sworn and signed before me at _____

on this _____ day of _____ 20_____

by the deponent who declares that he/she read and understood this declaration and regard it as binding on his/her conscience.

Commissioner of Oaths

FOR OFFICE USE:

Delete which is not applicable:

Registration approved on condition that the material information in the affidavit is accurate and remains so.

Not approved. Reason if not approved:

Signed on _____ (date) on behalf of the Fund, being duly authorised thereto:

Initials and surname of signatory

Signature

Name of Fund

The information disclosed in this document will be treated as confidential and will only be used for the purposes for which it is intended in terms of applicable legislation. The De Beers Pension Fund (the Fund) has accordingly developed a Privacy Policy which covers how the Fund collects, uses, discloses, transfers, and stores members' personal information. Please visit the Fund's website to view the Privacy Policy should you require additional information