



Who must complete this form?

HR must complete this form on behalf of the deceased employee.



What should accompany this form?

- Death certificate
- Marriage certificate
- Children's birth certificates or ID's
- Widow/widower's ID
- Sanlam Statement on Death form and Sanlam Funeral Claim form



When must this form be completed?

This form should be submitted as soon as all documentation is available.

SECTION A: PERSONAL DETAILS OF THE DECEASED

Surname			
First names			
Email address		Cellphone no.	
Policy number		Operation	
ID number		Tax number	
Date of birth		Date of death	
Date employed		Date they joined the Fund	

SECTION B: SERVICE OUTSIDE OF SOUTH AFRICA

Did the deceased have any group service outside the Republic of South Africa? Yes No

If yes, a letter from the employer on a company letterhead must be attached confirming the foreign service.

Where the deceased had service in South Africa, Namibia, Botswana or any other country, the following will apply:

- The De Beers Pension Fund (the Fund) will apply for a tax directive from the South African Revenue Service as well as the Namibian Inland Revenue Office.
- The Fund has an obligation to conform to these requirements and is not allowed any discretion at all in this regard.

SECTION C: CERTIFICATE BY EMPLOYER FOR OUTSTANDING DEBT

Did the deceased have a housing loan/bond for which the Company provided security/guarantee? Yes No

(If yes, a copy of the signed agreement must be attached)

Amount to be recovered from the deceased's death benefit: R

Payment to be issued in favour of:

SECTION D: EXECUTOR'S DETAILS

Name

Address

Code

SECTION E: TICK TO CONFIRM THAT THE FOLLOWING ARE ENCLOSED

Death certificate

Marriage certificate

Children's birth certificates or ID's

Widow/widower's ID

Sanlam Statement on Death form and Sanlam Funeral Claim form

Confirm the date that the Statement on Death form and Funeral Claim form were submitted to Sanlam:

NOTE TO HR

The following forms must be provided to the dependants of the deceased member to complete and submit to the Fund

1. Widow/widower's Sworn Declaration (M11.2)
2. Declaration by spouse, children, nominee or other dependants of the deceased

SECTION F: SIGNATURES

HR Officer Name

Signature

Date

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