



When must this form be completed?

This form should be completed when a member is retiring from the Fund and elects to purchase a living annuity, after any commutation, with his/her full Fund Credit.



Who must complete this form?

This form must be completed by the retiring member.

SWORN DECLARATION

I, the undersigned

Full name

Fund Membership number

Confirm that:

1. I have asked the Board of the De Beers Pension Fund ("the Fund") to use all of my Fund Credit and any deferred defined benefit I may have, after deducting any amount taken as a cash lump sum, to provide me with a living annuity.
2. Tick whichever applies to you:

I have received, and will continue to receive, expert financial advice in respect of the following:

I have the necessary financial skills or expertise to make a decision at this stage on my own and have done so in relation to the following, and I undertake to continue to assess the following on an ongoing basis or to obtain expert financial advice regarding the following if and when I require it:
 - my financial needs and the extent to which these are required to be met from the pension payable to me from the Fund or an insurer;
 - the amount from my living annuity which I may draw in any financial year without jeopardizing my financial security or that of my spouse/approved life partner or other dependants; and
 - whether I have other assets of such a value as adequately to minimize the risk that I will be made destitute if I receive too much of the capital amount in the early years of my retirement.
3. I understand that I am responsible for my own financial decisions. When deciding how much income to draw from my living annuity each year or how to invest my living annuity assets, I will make my own decisions and will not rely on advice from the Fund's Board members or officials.
4. I understand that I am responsible for my financial decisions and any decision regarding my living annuity, the amounts I elect to draw from my living annuity in any financial year or the investment of the assets in my living annuity component account. I will not rely on any advice which may be given to me by the Board members or officials of the Fund.
5. I make this declaration and the waiver set out below in full knowledge of the consequences of doing so.
6. I hereby waive any claim which I may have against the Fund, the members of its Board of management and its employees for losses sustained by me or my dependants arising from electing a full living annuity, the amounts I elect to draw from my living annuity in any financial year, or any other decision whatsoever relating to the living annuity.
7. I indemnify the Fund, the members of its Board of management and its employees against any claims, including any claim for costs, which may be made against it or them by my spouse/approved life partner(s) and/or other dependants arising from my decision to elect a full living annuity, the amounts I elect to draw down from my living annuity in any financial year, or any other decision whatsoever relating to the living annuity.

Member's signature

Date

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.