

Please complete in **BLOCK LETTERS** using black or blue ink.

PLEASE E-MAIL, FAX OR POST THE COMPLETED FORM AND SUPPORTING DOCUMENTS TO:

SuperFund Claims Department
Old Mutual SuperFund
PO Box 728
Cape Town 8000
E-mail SuperFund@oldmutual.com
Fax 0860 383 848

TO BE COMPLETED BY THE NON-MEMBER SPOUSE IN THE EVENT OF A DIVORCE SETTLEMENT CLAIM

Note:

An application by the non-member spouse for the settlement of a divorce award will only be deemed to have been received once all the required documents and information are in the possession of this office.

The following documents must accompany this application (please tick appropriate box):

	Already supplied	Attached	N/A
■ Original certified copy of non-member spouse identity document	<input type="checkbox"/>	<input type="checkbox"/>	
■ Original certified copy of the Divorce Court Order	<input type="checkbox"/>	<input type="checkbox"/>	
■ Original certified copy of any Settlement Agreement that has been made an order of court	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ Application forms for transfer to another approved fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 1 – DETAILS OF MEMBER

1. Scheme name	<input type="text"/>
2. Scheme code	<input type="text"/>
3. Reference number	<input type="text"/>
4. Member full names and surname	<input type="text"/>
5. Date of birth	<input type="text" value="D D M M Y Y Y Y"/>
6. ID number	<input type="text"/>

SECTION 2 – DETAILS OF NON-MEMBER SPOUSE

Title*	<input type="text"/>	Initials*	<input type="text"/>
Surname*	<input type="text"/>		
First names*	<input type="text"/>		
RSA ID number*	<input type="text"/>	Income tax number*	<input type="text"/>
Passport number* (if not a South African citizen)	<input type="text"/>		
Country of issue* of passport	<input type="text"/>		
Date of marriage*	<input type="text" value="D D M M Y Y Y Y"/>	Date of divorce*	<input type="text" value="D D M M Y Y Y Y"/>
Residential address*	<input type="text"/>		
Complex number and name	<input type="text"/>		
Street number and name	<input type="text"/>		
Suburb	<input type="text"/>	City/Town	<input type="text"/>
Code	<input type="text"/>		
Postal address (complete only if different from residential address)*	<input type="text"/>		Postal code <input type="text"/>
Contact details (at least one contact detail must be supplied)*	<input type="text"/>		
Work telephone number	Code <input type="text"/>	No. <input type="text"/>	Cellphone number <input type="text"/>
Email	<input type="text"/>		

* **Mandatory fields to complete.**

SECTION 3 – PAYMENT OPTIONS

Notes:

- The divorce award may be taken in cash or transferred to another approved pension, provident, pension preservation, provident preservation or retirement annuity fund. Transfer of benefits to a preservation fund can only be to one preservation fund and cannot be split amongst more than one.
- As from 1 March 2012 the non-member is the taxpayer when claiming a divorce award - this applies to all divorce orders, irrespective of the date of divorce.
- Where the divorce order was granted before 13 September 2007, the award is tax-free, whether taken in cash or transferred to another fund. If you transfer the divorce award to another fund, this tax-free award will be taxed when you eventually leave such fund.
- It is strongly recommended that you preserve your benefit. To ensure that you make an informed decision, you should talk to a financial adviser. If you do not have your own financial adviser, contact 0860 388 873 (Sharecall) or email membersupportservices@oldmutual.com.

Benefit Options – select one of these options [indicate choice with a tick (✓)]

1. Transfer full benefit to another approved Fund. Attach copy of proposal or application form.
 Full name of approved Fund:

Transfer Fund Contact Person Details

Name and surname
 Telephone number Code No.
 Email

2. Cash Lump Sum. If Cash option elected, complete the Method of Payment option below.

Non-member Spouse’s Bank Account Details (for cash payments) (This must be your own bank account.)

Name of account holder
 Bank
 Branch name
 Account number
 Branch code
 Type of account (✓) Cheque Savings

Signature of non-member spouse

Date



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