OLD MUTUAL SUPERFUND RETIREMENT BENEFIT CLAIM FORM

You have come to an exciting point in your life, where you have to make important decisions about your future, including how you will be investing your retirement savings.

To ensure that you are fully equipped to make the important decision associated with this life-changing event, please familiarise yourself with the following:

- Read the step-by-step Old Mutual SuperFund Retirement Guide which highlights the options that are available to you at retirement from your employer - visit www.oldmutual.co.za/SuperFund/RetiringMembers
- Read about the benefits of the Old Mutual SuperFund Solutions at Retirement for the options selected by the Old Mutual SuperFund Management Board

You can obtain a quotation by:

- 1) consulting with your financial adviser (if you make use of one)
- 2) calling 0860 388 873 or emailing superfundannuity@oldmutual.com

COUNTDOWN TO RETIREMENT

Now that you are well informed about your options at retirement, you can start counting down to your retirement.

Six months to retirement	Three months to retirement	Six weeks to retirement				
You should: Notify your Employer and Old Mutual SuperFund of your approaching retirement and request your latest retirement benefit value by calling 0860 20 30 40. Note that your retirement benefit value can also be accessed via the secure member website and on the mobile site	You should: Find out more about the retirement options which are offered by Old Mutual SuperFund Speak to a qualified financial adviser about your options at retirement	You should ensure that: Your Employer has forwarded your exit documents, or your election to defer retirement to Old Mutual Old Mutual has your tax registration number You select the type of annuity (or combination of annuities) that best suits your needs				
One month to retirement	Retirement! Your big day!					

You should by now:

• Have made an election to defer retirement from Old Mutual SuperFund

OR

If you choose to annuitise;

- Have requested your final quotation
- Have arranged for the purchase of your annuity and
- Have completed and signed the application form for your preferred annuity product (or combination of annuities)

· If you choose to defer your retirement, you will remain invested and your savings will keep growing. You will receive a welcome letter shortly after, confirming your membership in Old Mutual SuperFund Deferred Retirement, with further information on your investment and benefits.

OR

If you chose to annuitise you should receive your:

- Cash lump sum, if you have selected one (subject to the required tax clearance being obtained from the Receiver of Revenue) and;
- First pension payout* from the annuity product you have selected, unless you took 100% of the benefit as a cash lump sum (Provident Fund only).
- * Provided all the required information and documents have been given to the insurer.



CORPORATE

DO GREAT THINGS EVERY DAY



OLD MUTUAL SUPERFUND RETIREMENT BENEFIT CLAIM FORM

Please complete accurately, using captial letters in blue or black ink. Tick (✓) blocks where appropriate.

Please email or fax the completed form and supporting documents to:

Claims Department Old Mutual SuperFund PO Box 728 Cape Town 8000

Fax 0860 383 848

Email SuperFund@oldmutual.com

THE FOLLOWING SECTION MUST BE COMPLETED BY THE EMPLOYER.

PARTICIPATING EMPLOYER BUSINESS DETAILS																													
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^{*} Insert the details where the member will be contactable after leaving this employer

MEMBER EXIT DETAILS									
Date of retirement D D M M Y Y Y Y	Final contributing month DDMMYYYY	Υ							
Amount of final contribution: Employee	R Employer R	+							
TYPE OF RETIREMENT [indicate the appropriate option	with a tick (✔)]								
Normal retirement Early retirement	III-health retirement (attach approval)	nent							
REMUNERATION DETAILS									
Final GROSS annual pensionable salary at date of retirer	nent R								
Final GROSS annual taxable salary at date of retirement									
PRIOR CLAIM [indicate the appropriate option with a tic	k (/)]								
Is any Prior Claim payable?	YES NO								
If "YES", complete a Prior Claim Form and attach it to t	nis form.								
CHECKLIST FOR REQUIRED DOCUMENTATION [indicate	with a tick (/) which documents are attached to this form]								
Original Certified means that a Commissioner of Oaths, the certification of a document. The certified document	Justice of the Peace, Postmaster or Police Official, including the rank is to be original.	, name and force number, confirms							
Annuity application form (stating the proposal nur	nber) Prior claim form and relevant suppor	ting documentation (if applicable)							
Original certified copy of member's identity docum	ent Authorised approval from employer f	or III-health early retirement							
Original certified copy of spouse's identity docume	nt (if applicable)								
DECLARATION BY PARTICIPATING EMPI	OYER								
I,		the undersigned,							
hereby certify that all particulars furnished in this form a	nd accompanying documentation are true and correct.								
Signed on behalf of employer		OFFICIAL							
		COMPANY							
Designation		STAMP							

THE FOLLOWING SECTION MUST BE COMPLETED BY THE RETIRING MEMBER.

WHAT ARE MY OPTIONS AT RETIREMENT FROM EMPLOYMENT?

Postpone payment of retirement benefit by porting to Old Mutual SuperFund Deferred Retirement.

- You can postpone your retirement from SuperFund and remain invested until a date of your choosing
- Your savings will continue growing in a cost effective solution that gives you investment choice and flexibility

${\bf Claim\ your\ retirement\ benefit\ and\ retire\ from\ Old\ Mutual\ SuperFund}$

Pension Fund

- You can take a maximum of one-third of your Member Account Balance in cash and use the remainder to purchase an annuity from a registered insurer; or
- You can purchase an annuity from a registered insurer using your full Member Account Balance. (if your total retirement benefit is R247 500 or less, the total benefit may be taken in cash); or
- You can transfer your entire Member Account Balance to an approved pension preservation fund or retirement annuity fund

Provident Fund

- You can take your full Member Account Balance in cash; or
- You can take any portion of your Member Account Balance in cash and use the remainder to purchase an annuity from a registered insurer; or
- You can purchase an annuity from a registered insurer using your full Member Account Balance; or
- You can transfer your entire Member Account Balance to an approved pension preservation fund, provident preservation fund or retirement annuity fund

Some important information

D M M Y

- The decision whether to claim or to postpone the payment your retirement benefit should not be taken lightly, as you need to ensure that your provide for your financial security during retirement
- All options elected must be in terms of the Rules of the Fund and it is advisable to consult a Financial Adviser to assist you in making the right choices best suited to your own personal needs and circumstances. If you do not have your own Financial Adviser, contact 0860 388 873 (Sharecall) or email superfundannuity@oldmutual.com, and a member support service consultant will put you in contact with an accredited financial adviser

BENEFIT PAYMENT OPTIONS (Options must be elected in terms of the rules of the Fund) Please complete the relevant section pertaining to the Fund that you are retiring from. Benefit Payment Option (select ONE only) **Full Annuity** Defer my retirement from the Fund (max. one-third in respect of Pension Fund) of the total available benefit Cash of % or R and the balance to a compulsory annuity Annuity to be purchased from: (can select more than one) Old Mutual Fund Select Annuity (If you want a quotation, please call 0860 388 873) Other Annuity Provider(s) Full Annuity or Balance Annuity to be purchased from a Registered Insurer (please complete the table below and attach copies of the application/proposal form(s)). If other annuity providers, please complete the following: Name of annuity product Type of annuity product Compulsory Percentage of Benefit to be applied to this product Name of Registered Insurer Address **Contact name Contact number** Transfer my entire Member Account balance to a Retirement Annuity Fund (ensure application form is attached) Name of Retirement **Annuity Fund** FSCA registration number | 12 8 Name of administrator **Contact name** Address Contact number Transfer my entire Member Account balance to a Preservation Fund (ensure application form is attached) Name of Preservation Fund FSCA registration number | 12 Name of administrator **Contact name Contact number** Address NB Please note that interest added to your benefit between the date on which a tax directive application was requested and the date of payment, will always be taxable in your hands, irrespective of whether it is paid out in cash or included in the value used to purchase an annuity. Please select below how you wish this interest to be dealt with (select one option only) : Pay out in cash into my bank account Include in the annuity purchase value Conversion Option (if selected by the employer as a benefit option) Do you wish to utilise the Conversion Option in respect of your Group Life Cover? Please contact your financial adviser for further information. **COURT ORDERS - COMPULSORY TO COMPLETE** YES NO Do you have any divorce order(s) and/or maintenance court order(s) against your benefit? If "Yes", please attach: - original certified copy/copies of the relevant court order(s); and

- in the case of divorce court order(s), contact details of your former spouse/s (if not already supplied to Old Mutual).

BANK ACCOUNT DETAIL FOR CASH PORTION OF THE BENEFIT

(Must be your own bank account.)								
Name of								
account holder								
Name of bank			Name of branch					
Account number			Bank branch code					
Type of account	Cheque	Savings						

PPI DISCLOSURE

The Fund will provide you with ongoing communication and information about Fund related products or services that may be suitable to meet your Fund related financial needs.

We may use your information or obtain information about you for the following purposes:

- · Underwriting in respect of Fund risk benefits
- · Assessment and processing of Fund benefit claims
- · Member communication
- · Verification of personal information
- · Claims checks (industry Life and Claims Register)
- · Tracing beneficiaries
- · Fraud prevention and detection
- · Market research and statistical analysis
- · Audit and record keeping purposes
- · Compliance with legal and regulatory requirements
- · Verifying your identity
- · Updating your personal information
- Sharing information with service providers we engage to process such information on our behalf or who render services to the Fund. These service providers may be abroad, but we will not share your information with them unless we are satisfied that they have adequate security measures in place to protect your personal information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases you have the right to object to the processing of your personal information.

You also have the right to complain to the Information Regulator, whose contact details are:

http://www.justice.gov.za/inforeg/index.html

Tel: 012 406 4818

Fax: 086 500 3351

Email: inforeg@justice.gov.za

Please visit our Secure Services website on https://secure.dcc.oldmutual.co.za/omlogin.aspx and access 'Self Service' under 'My Portfolio' to exercise your preferences

To view our full privacy notice, visit https://www.oldmutual.co.za/corporate/retirement-funds/superfund-privacy-policy

DECLARATION BY MEMBER

The options in terms of the Rules of the Old Mutual SuperFund have been fully explained to me and I confirm that I fully understand the implications of the choices elected. I also certify that all particulars furnished in this form and accompanying documentation are true and correct.

