

PROVIDENT FUND FOR THE FURNITURE MANUFACTURING INDUSTRY OF THE WESTERN CAPE

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APPLICATION FOR RETIREMENT BENEFIT

TAX NUMBER:

I.R.P.5 NUMBER:

SURNAME:.....

FIRST NAMES:.....

ADDRESS:.....

..... TEL. NO.:.....

I.D. NUMBER: INDEX NO.:

NAME OF LAST EMPLOYER:..... WAGE PER WEEK.....
(Last Factory worked at in the Furniture Industry)

TRADE OR OCCUPATION:

PERIOD OF SERVICE WITH LAST EMPLOYER:

DATE OF LEAVING THE FURNITURE INDUSTRY:

Having reached the age of I hereby claim the retirement benefit due to me.

BANKING DETAILS – I hereby request and authorise the Provident Fund to deposit my benefit into my bank account.

Name of Bank:..... Branch Code:

Account Number:..... Branch:.....

Name of Account Holder:..... Type of Account:.....

PROOF OF DATE OF BIRTH

Type of document produced: Number:

Place of issue: Date of issue:

Council Official: Date:

Secretary: Date:

I understand that payment by the Fund of moneys due to me in terms of this application is no bar to my continued employment in the Industry but that I shall on receipt of such moneys have no further claim on the Fund.

SIGNED: DATE:

FOR OFFICE USE ONLY

LUMP SUM: TOTAL:

TAX: CHEQUE NUMBER:

HOUSING LOAN: DATE:

PART PAYMENT: