

Operations and Administration

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Authorised signatories

Digital Employer Solutions

Are you aware of and using our suite of Digital Employer Solutions? We have various online **claim submission** solutions, an online **contribution submission** solution and a solution that provides you with online **access to your employees' retirement fund records** so that you can become self-sufficient in query resolution.

Digital engagement is **more efficient**, offers **superior risk mitigation**, and **improved service levels** to both you and your employees. If you are one of the few clients not yet taking full advantage of our digital solutions, please **click** here to initiate the process of gaining access.

Name of retirement scheme

I hereby confirm that the following persons are authorised to act on behalf of the company with regard to transactions relating to the above named fund:

Name of employer/paypoint

First names

Surname

Title Prof Dr Mr Mrs Ms Other (specify)

ID or passport number

Designation

Contact details

Cell

Home

Work

Email

Authorised to sign and submit

Withdrawal form Retirement form Death form Disability form Other (specify)

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Authorised
signatory's initials

Name of employer/paypoint

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First names

Grid for First names

Surname

Grid for Surname

Title Prof Dr Mr Mrs Ms Other (specify)

Grid for Title

ID or passport number

Designation

Grid for ID or passport number and Designation

Contact details

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First names

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Surname

[Grid for Surname]

Title Prof Dr Mr Mrs Ms Other (specify)

[Grid for Title]

ID or passport number

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Designation

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First names

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Surname

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Title Prof Dr Mr Mrs Ms Other (specify)

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ID or passport number

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Authorised signature _____

Designation

[Grid for Designation]

Financial Director/Head of Human Resources

Date

D	D	M	M	Y	Y	Y	Y
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Notes:

1. An original certified copy of the nominated authorised signatory's identity document must be attached to this form.
2. As soon as you are aware of a change in signatory/ies, please notify Alexander Forbes by completing this form to the contact details as specified in the administration manual.
3. This is the latest form and it replaces/supersedes any other list of authorised signatories that has been provided to Alexander Forbes in the past.
4. Please ensure that a primary signatory is provided as well as a back-up signatory in the event of the primary signatory not being available.
5. The employer accepts full and complete responsibility for the accuracy and integrity of all instructions to Alexander Forbes.

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