

ACKNOWLEDGEMENT/ KANANELO:

**OPTION TO NOT APPLY WITH DISABILITY APPLICATION
KGETHO YA HO SE ETSE KOPA YA MELEMO YA BOQHWALA**



Please send your completed form to:

Mail: The Manager, Sentinel Retirement Fund, PO Box 61172, Marshalltown, 2107

Email: info@sentinel.za.com

Hand in: at your nearest Client Service Centres situated in Sandton, Welkom, Klerksdorp, Carletonville and Witbank/Ermalahleni.

Industry / Participant Number (Member)		
Title	Initials	Surname

I HEREBY CONFIRM AS FOLLOWS/ KA SENA KE NETEFATSA KA TSELÀ E LATELANG:

1. I elect not to apply for a disability benefit.
Ke kgetha ho se etse kopo ya melemo ya boqhwala,
 2. To qualify, I am required to prove to the Fund's Board that I am totally and permanently disabled for my own and a similar occupation in a specific environment.
Bakeng sa ho tshwaneleha, ke lokela ho bontsha Boto ya Letlolo hore ke qhwadile ka ho feletseng le ka ho phethahala bakeng sa mosebetsi wa ka le o tshwanang le ona tikolohong e itseng.
 3. I know that after leaving the service of a participating employer, I can elect the alternative option to claim a termination benefit or early retirement benefit from the Fund.
Ke a tseba hore kamora ho tlohela mosebetsi wa mohiri ya nkang karolo nka kgetha kgetho e nngwe kgetho ya ho tseka molemo wa ho tlohella kapa ho diela mosebetsing pele ho nako Letloleng.
 4. I have elected to claim a termination / early retirement* benefit.
Ke kgethile ho tseka molemo wa ho tlohella / ho diela mosebetsing pele ho nako.*
 5. I have been informed that:
Ke tsebisitswe hore:
 - a. A termination benefit / early retirement benefit does not include the disability cover which is included in an in-service disability benefit. It comprises my fund credit only;
Molemo wa ho tlohella / molemo wa ho diela mosebetsing pele ho nako ha ho kenyeleletse tshireletso ya boqhwala e kenyeleditsweng molemong wa ha o ka qhwala o le mosebetsing. E fupere feela tjhelete ya ka ya letlolo;
 - b. A termination benefit is payable as a once off lump sum. An early retirement benefit is payable as a monthly pension with a maximum commutation of one-third (subject to certain exceptions which may not apply to me);
Molemo wa ho tlohella o lefuwa e le tjhelete e sekolokoto. Molemo wa ho diela mosebetsing pele ho nako o lefuwa e le pentjhene ya kgwedi ka nngwe e sebeditsweng e le nngwe tharong ya mokgolo (ho ipapisitswe le mekgelo e itseng e sa sebetseng ho nna);
 - c. I cannot receive a termination benefit / early retirement benefit and a disability benefit from the Fund for the same service period;
Nkeke ka thola molemo wa ho tlohella mosebetsi / molemo wa ho diela mosebetsing pele ho nako le molemo wa boqhwala Letloleng bakeng sa nako e tshwanang ya tshebetso:

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CONTINUED



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- d. Once the Fund puts my election into effect:
Want to let the trustee know you've taken

Hang ha Letlole le kenya kgetho ya ka tshebetsong:

- i. I cannot revoke it or change my mind.
Nna nkeke ka e tsoseletska kapa ka fetola mohopolo,

- ii. I will have no claim to any other benefit from the Fund for the same service period, including a disability benefit (or part of a disability benefit); *Nkeke ka tseka molemo leha e le ofe Letloleng bakeng sa nako e tshwanang ya tshebetso, ho kenyelletswa le molemo wa boqhwala (kapa karolo ya molemo wa boqhwala).se.* Once a termination benefit is paid or transferred, no benefit will be payable by the Fund on my death as is the case

with a retirement benefit;

Hang ha molemo wa ho tlohellia mosebetsi o se o lefuwe, ha ho molemo o tla lefuwa ke letlole ha ke hlokahala jwalo ka ho etsahala ka molemo wa ho diela mosebeetsing;

- f. A termination withdrawal benefit is generally taxed differently to a retirement benefit.
Molemo wa ho tloholla mosobetsi ka kakaretso o lefiswaa lekgagthe ka tselo o fapaneng

I acknowledge that by electing this option and signing this document:

6. I also acknowledge that by electing this option and signing this document:
Ke anapela hape le hora ka ho etsa kaetho ena le ho saena tokomane ena:

Kē ananele nape le noke ka no Elsa Kyetho enia te no saeria tokomarie enia.

- a. I waive any right to claim that I was not informed of the consequences of my election; Ke lablebelwa ke tokelo leha e le efe ya ho tseka hore ke ne ke sa bolellwa ka ditlamora

Ke lanteretwa ke tokelo tenu e le ele ya no lsekia nore ke ne ke sa botellwa ka ditumorroao tsu kgetru ya ka.

- b. I will have no basis to dispute my decision through the courts, the Pens

seek an order that the Fund must award me a disability benefit for the same service period;

- Nkeke ka ba le motheo wa ho hanyetsa qeto ya ka makgotleng a dinyewe, ho Moahlodi wa Matlole a Pentjhene kapa foramo leha e le efe, kapa ho batla taelo ya hore Letlolo le lokela ho mputsa bakeng sa boqhwala mabapi le nako e tshwanang ya tshebetso;

I understand that my reasons for electing this option or subsequent change in my financial or personal circumstances do not affect what is stated here.

Ke utlwisia mabaka a ka a ho etsa kgetho ena kapa phethoho e tla ba teng maemong a ka a ditjhelete kapa a bophelo ha dij ame seo ke se boletseng mona.

7. I understand this document and sign it voluntarily and without duress.

Ke utlwisa tokomane ena le ho e saena ka boithaopo le ka ntle ho gobello.

If the translated version and the English version differ or in any way leads to ambiguous interoperation, the English version will prevail. (Do obtain input from a Fund Consultant for clarity if this occurs.)

50

Electronic signatures are not permitted to be used on this Application Form.

Carletonville: S Buys Office Park, Shop 10, Corner Kaolin and Radium Streets, Tel (011) 481 8290/1
Klerksdorp: 54 Buffeldoring Street, Wilkopies, Tel (018) 468 7309 | **Welkom:** Shop 24, The Strip, 314 Stateway, Tel (011) 481 8025/6
Emalahleni/Witbank: WCMAS Building, Corner OR Tambo and Susanna Streets, Tel (011) 481 8295/6