DETAILS OF DECEASED PENSIONER

DOPEN01

Industry / Participant Number of Deceased	Identity / Passport Number of Deceased

Please send your completed form to:

Email: info@sentinel.za.com

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

IMPORTANT NOTES:

Failure to complete ALL the information may lead to a delay in finalising the claim for benefits. In the event that the deceased was married previously please provide all particulars on page 2. In the event of the information being incomplete or incorrect the fund reserves the right to suspend any/all pensions awarded and institute legal action if deemed necessary.

DETAILS OF THE DECEASED – ALL FIELDS TO BE COMPLETED

Title	Initials	Surname

Full Names (First Two Names in Full)			
1		2	

Identity | Passport Number		Gender	M	F
Tax Number of Deceased Pensioner		Birth Date	Y Y Y Y M M D D	
Cause of Death				
Was the deceased and his spouse living together at time of death?			Y	N

DETAILS OF CHILDREN *(INCLUDES BIOLOGICAL AND LEGALLY ADOPTED CHILDREN)*

Please list the following details of all the legal and/or adopted children of the deceased (Both under and over the age of 18 years)

Initials	Surname (Child 1)	Date Of Birth
		Y Y Y Y M M D D
Initials	**Surname (Child 2)**	**Date Of Birth**
		Y Y Y Y M M D D
Initials	**Surname (Child 3)**	**Date Of Birth**
		Y Y Y Y M M D D
Initials	**Surname (Child 4)**	**Date Of Birth**
		Y Y Y Y M M D D
Initials	**Surname (Child 5)**	**Date Of Birth**
		Y Y Y Y M M D D
Initials	**Surname (Child 6)**	**Date Of Birth**
		Y Y Y Y M M D D

DETAILS OF DECEASED PENSIONER
- CONTINUED

Industry / Participant Number of Deceased	Identity / Passport Number of Deceased

DETAILS OF SPOUSE / COHABITING PARTNER

Title	Initials	Surname

Date of Birth Y Y Y Y M M D D Date of Marriage Y Y Y Y M M D D

DETAILS OF FORMER SPOUSE/S AND/OR COHABITING PARTNER/S

FORMER SPOUSE 1

Title	Initials	Surname

Date of Birth Y Y Y Y M M D D Date of Marriage Y Y Y Y M M D D

FORMER SPOUSE 2

Title	Initials	Surname

Date of Birth Y Y Y Y M M D D Date of Marriage Y Y Y Y M M D D

FORMER SPOUSE 3

Title	Initials	Surname

Date of Birth Y Y Y Y M M D D Date of Marriage Y Y Y Y M M D D

FORMER SPOUSE 4

Title	Initials	Surname

Date of Birth Y Y Y Y M M D D Date of Marriage Y Y Y Y M M D D

PLEASE ANSWER ALL THE FOLLOWING QUESTIONS (TICK THE APPLICABLE BLOCK)

Did the deceased have any legal obligation to any third party in terms of a divorce agreement?			Y	N
Maintenance to ex-spouse	Y	N	Maintenance in respect of minor child	Y N
Did the deceased support any other parties e.g. parents etc?			Y	N

If YES, please provide details

Is the spouse of the deceased currently employed?	Y	N
Was the spouse of the deceased registered as a dependant on the medical aid of the deceased?	Y	N

DETAILS OF DECEASED PENSIONER
- CONTINUED

Industry / Participant Number of Deceased	Identity / Passport Number of Deceased

PLEASE ANSWER ALL THE FOLLOWING QUESTIONS (TICK THE APPLICABLE BLOCK) - CONTINUED

Is the spouse of the deceased currently employed?	Y	N
Was the spouse of the deceased registered as a dependant on the medical aid of the deceased	Y	N
Did the deceased leave a valid will?	Y	N
Is the estate of the deceased solvent?	Y	N

Details of Executor							
Tel Number		Mobile Number					
Email							
Please indicate the preferred method of communication	SMS		Email		Telephonic		Postal

I declare the above to be correct to the best of my knowledge.

Title	Initials	Surname

Signed on this		Day of		2	0		at	

Signature	Date
Electronic signatures are not permitted to be used on this Application Form.	Y Y Y Y M M D D

Sandton: 5th Floor, 92 Rivonia Road, Wierda Valley, Sandton, 2196 | **Toll-Free** 0800 776 861
Carletonville: S Buys Office Park, Shop 10, Corner Kaolin and Radium Streets, Tel (011) 481 8290/1
Klerksdorp: 54 Buffelsdoorn Road, Flamwood, Tel (011) 481 8024/8 | **Welkom:** Shop 25, The Strip, 314 Stateway, Tel (011) 481 8025/6
Emalahleni / Witbank: WCMAS Building, Corner OR Tambo and Susanna Streets, Tel (011) 481 8295/6