



insurance and risk services
employee benefits
wealth management
health

po box 449
cape town
8000
tel: 0860 00 44 00
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www.rbs.co.za

APPLICATION FOR SETTLEMENT OF DIVORCE BENEFITS BY NON-MEMBER SPOUSE

To be completed by the non-member's spouse in the event of a divorce settlement claim

Note:

An application by the Non-member spouse for the settlement of a divorce award will only be deemed to have been received once all the requirement documents and information are in the possession of this office.

DOCUMENTARY REQUIREMENTS

- Original Certified Copy of Non-Member Spouse Identity Document ENCLOSED
- Original Certified Copy of the Divorce Court Order (full document) ENCLOSED
- Proof of Non-Member Spouse Banking Details (in respect of cash payments) ENCLOSED
- Application Forms for Transfer to Another Fund ENCLOSED

SECTION 1 – DETAILS OF MEMBER

1. Scheme Name										
2. Scheme Code										
3. Member's Reference Number										
4. Full Names and Surname of Member										
5. Date of Birth	C	C	Y	Y	M	M	D	D		
6. Identity Number										
7. Member's Personal Income Tax Number										
If no income tax number is provided, please advise reason										
8. Contact details of Member	Work Tel:									
	Cell/Home Tel:									
	E-mail:									

SECTION 2 – DETAILS OF APPLICANT (NON-MEMBER)

1. Title										
2. Full Names and Surname of Ex-Spouse										
3. Identity Number										



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SECTION 2 – DETAILS OF APPLICANT (NON-MEMBER) continued

4. Date of Marriage	C	C	Y	Y	M	M	D	D
5. Date of Divorce	C	C	Y	Y	M	M	D	D
6. Postal Address of Ex-Spouse								
7. Physical Address of Ex-Spouse								
8. Contact details of Ex-Spouse	Work Tel:							
	Cell/Home Tel:							
	E-mail:							

SECTION 3 – PAYMENT OPTIONS

The divorce award may be taken in cash, or transferred to another approved pension, provident or retirement annuity fund.
Please indicate your payment option below and provide all relevant details.

Full Cash Payment (complete section 3.1)	<input type="checkbox"/>	Full Transfer to Another Fund (complete section 3.2)	<input type="checkbox"/>
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SECTION 3.1 – EX-SPOUSE’S BANK ACCOUNT DETAILS (CASH PAYMENTS ONLY)

Name of Account Holder							
Bank							
Branch Name							
Branch Code							
Account Number							
Type of Account (✓)	Cheque	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Transmission	<input type="checkbox"/>	



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SECTION 3.2 – OTHER FUND DETAILS (FOR TRANSFER TO ANOTHER FUND ONLY)						
Full Name of Approved Fund						
Type of Approved Fund (✓)	Pension	<input type="checkbox"/>	Provident	<input type="checkbox"/>	Retirement Annuity	<input type="checkbox"/>
Name and Surname of Contact Person at Approved Fund						
Telephone Number						
Fax Number						
E-mail						
Bank Account Details of Approved Fund						
Name of Account Holder						
Bank						
Branch Name						
Branch Code						
Account Number						
Type of Account (✓)	Cheque	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Transmission	<input type="checkbox"/>

SIGNATURE OF EX-SPOUSE

DATE