



Change of contact/banking details form

Please select one of the following options:

I am a **guardian** wishing to change my contact/banking details.

I am a **major beneficiary** (18 years and older) wishing to change my contact/banking details.

I am a **minor beneficiary** (younger than 18 years) wishing to change my contact details.

I am a **major beneficiary** (18 years and older) requesting payment to be made directly to myself and provide herewith my banking details.

SECTION A: Contact details of beneficiary/guardian

Title, full names and surname:					
ID number:		Member number:			
Contact number(s):	Home:		Cell:		
E-mail address:					
Home Address:			Postal Address:		

SECTION B: Banking details

Name of account holder:			Name of bank:			
Account number:			Branch code:			
Account type:	Savings		Cheque		Current	Transmission

Please note the following:

- Payments cannot be made to credit card or bond accounts.
- Payments cannot be made to a third party.
- Payments cannot be split into different bank accounts.

SECTION C: Documents to be submitted with the application		Attached	
1.	In the case of a guardian or a major beneficiary : An original certified copy of the Identity Document or Smart ID card (include both sides).	YES	NO
2.	In the case of a minor beneficiary : An original certified copy of the Identity Document, Smart ID card (include both sides) or the birth certificate.	YES	NO
3.	A bank statement (not older than three months) or a bank mandate (not required for minor beneficiaries).	YES	NO

SECTION D: Declaration

Declaration by the guardian/beneficiary

I, the undersigned guardian/beneficiary, hereby confirm that:

- The information given herein is true and correct.
- I am the account holder on the above-mentioned bank account.
- I instruct and authorise Sanlam to pay all monies due to me in accordance with my instructions above.

Signature of Guardian/Beneficiary

Date

Please e-mail the completed documentation to: **PSSBF@Futurasa.co.za** or fax it to **086 569 8770**