

## Request for a Tax Deduction Directive Pension and Provident Funds - Events Before Retirement or Death

**FORM B** 

FOR OFF	ICE	USE																																	
Application no.																																			
Тахрауе	r Det	ails																																	
Taxpayer reference no.								]				Year of	Asses	sment e	ended o	on (CC)	YYMMD	D)																	
Surname																																			
Name(s)																																			
Initials						Date	of Birth	(CCYYN	MDD)							lde	ntity nur	mber																	
Passport/ Permit no.																	Pass	oort Co	ountry /	Countr	y of Ori	igin (e.	g. Sout	th Africa	a = ZA	F)									
If the taxpayer/mer	nber is r	not regis	tered for i	income	e tax, se	elect o	ne of the	e followir	ng reas	sons:	Unen	nployed		Other		S	Specify o	other																$\top$	
Annual income R																Emplo	yee nui	mber										7							
Is the taxpayer a no	n-reside	ent?	Yes	No	0	]	Is the	e certifica	ate of r	esiden	cy (citiz	zenship o	ertifica	te only	where	DTA is	not app	licable	e) attacl	ned?	'es		N	0	]										
Residential	Addr	ess				_																													
																																		$\Box$	
																													Postal (	Code					
Postal Addre	ess																																		
																												Po	ostal Co	de				$\top$	
Particula	rs o	f Fur	nd																																
Registered Name of Fund				Τ		T																												$\overline{\mathbf{T}}$	
Contact Person																																		Ŧ	
E-mail address of Administrator																																			
Tel no.												ı	Membe	rship n	umber									Fun Pub	id Appr lic Sect	oval no. for Funds	(Applicab s)	ole to	1 8	2	0	4			

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Particula	re o	6 E	und	lec	n fi	mu	od)																																										
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Fund PAYE Reference no.	7										FSB	Reg	istratio	n no.	1	2	1	8	1	0	0							/																					
Participating Employer Name									$\perp$		$\perp$														L														$\coprod$	$\coprod$			$\coprod$	$\Box$					
										$\perp$																													$\perp$	$\perp$		$\perp$	$\perp$	$\perp$					
Type of fund:		Pe	nsion			Pro	ovider	nt				Pens	sion Pro	eserva	ation			Prov	viden	nt Pre	serva	ition																											
<b>Postal</b> Addre	ss																																																
																																										T		T					T
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Indicate whether th	is fund	is: A	oublic	sector	fund			An a	approve	ed fu	nd			Other			)				Spe	ecify o	ther		T		$\overline{}$	Ť	T										$\top$	Ť	Ť	寸	T	寸	Ħ	Ħ	$\equiv$		十
Particula						n S	Ш	ı D	ue																																								
Reason for directive															F	ar (e.	eA) Tra	ansfe	er/ Pa	aymer	nt	Divorce - Member Spouse							Divorce – Non-Member Spouse																				
	Resignation Withdrawal Involuntary Termination of Emplo											oymer	nt (Re	etreno	hmer	nt)			F	uture	e Surp	olus				Uı	nclain	ned B	enefit	t				Securi	ty of I	Morto	gage E	Bond	l Orde	er / H	ousir	g Loa	n						
Gross amount of lur	Gross amount of lump sum payment R												7														, ,																						
Date of accrual (CC	Date of accrual (CCYYMMDD)													_																																			
Date on which mem	Date on which membership commenced (CCYYMMDD)																																																
Date of divorce orde	er (CC)	YMMI	DD)				[		十		十			T	]																																		
If a public sector f	und, th	e peri	od, if a	ıny, dı	uring	whicl	h the	mem	ber wa	as a r	nemb	er of	anoth	er pu	_ blic s	ector	fund	:																															
Date From (CCYYM			•	•	Ū										_		To (0		/MMI	DD)										=			Comp	leted	year	s													
Period of employn	nent ta	ken in	to acc	ount ir	ı tern	ns of	the ru	ules o	f the f	und:	(only a	appli	cable	to Pu	blic S	ecto	r fund	ls)																															
Date From (CCYYM	Date From (CCYYMMDD)  Date To (CCYYMMDD)																			=		(	Comp	leted	year	rs																							
In the case of a P	rovide	nt fund	l:																																														
Total contributions by member to the fund <b>up to</b> 1 March 2016 (excluding profit and interest)														R															],																				
Total contributions by member to the fund after 1 March 2016 (excluding profit and interest)														R															],																				
ransfer by Non-member spouse previously taxed														R															] .																				
If a policy of insurar	policy of insurance is ceded to the member, state the surrender value as at date of cession (for the purpose of paragraph 4(2)bis of the Second Schedule)													le)	R															] ,																			
Where a member's	contrib	ution w	as ma	de dire	ectly b	y the	mem	ber to	the fu	nd.																R					Ī		Ī								,								
Former AIPF memb	er's co	ntributi	ons tra	ınsferr	ed to	the fu	ınd																			R				T	T								T	T	,		T	7					

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Particulars of Transfer
Did the fund pay any portion of the lump sum payment into another fund? Yes No
If 'YES', state the registered name of the transferee fund
The transferee fund type: Pension Fund Provident Fund Pension Preservation Provident Preservation Fund Provident Preservation Preservation Fund Provident Preservation Fund
Fund Approval no. (Applicable to Public Sector Funds)  The sector Funds is a sector Funds in the sector Fu
Participating Employer Name
E-mail address of transferee fund
Tel no. of transferee fund  Cell no. of transferee fund
Is the transferee fund a Public Sector Fund? Yes No Amount transferred to the transferee fund R
State if the transfer of the benefit is subject to special conditions. If yes, confirm the applicable provision in the fund rules.
If transferring from a pension/provident preservation fund, indicate if the previous partial withdrawal was taken from the preservation fund?  Yes  No  (If yes, state the details below:)
Date of partial withdrawal (CCYYMMDD)  Amount of partial withdrawal R
Directive number , , , , , , , , , , , , , , , , , , ,
Non Resident Service Rendered inside the Republic [Section 9(2)(i)]
Were any services rendered inside the Republic during the period of membership of the fund?  Yes No
Total number of months services were rendered while contributing to fund
Total number of months services were rendered inside the Republic while contributing to fund
Total number of months services were rendered outside the Republic while contributing to fund
Period of Employment in Public Sector Fund (excluding AIPF) [Only applicable where a benefit was paid into the current fund from a public sector fund]
Date From (CCYYMMDD)  Date To (CCYYMMDD)  = Completed years
Amount transferred or the amount attributed to the period of membership in the public sector fund R Date the amount was transferred from public sector fund (CCYYMMDD)
<b>Declaration</b>
Date (CCYYMMDD)  Date (CCYYMMDD)  For enquiries go to www.sars.gov.za or call 0800 00 7277  For enquiries go to www.sars.gov.za or call 0800 00 7277

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