



RSA ROLLOVER

The Form must be completed IN FULL by the Member and all required documents must be submitted together with this Application to the nearest Nambawan Super Ltd Branch. Please complete form in CLEAR BLOCK Letters. * Critical fields to be completed by member.



Section 1: Member details

*Given name(s):

*Surname: *NSL number:

*Gender: Male Female DOB: *Mobile number:

*Residential address:

Section 2: RSA rollover nomination

K250,000.00, maximum allowable investment limit | **K10,000.00**, minimum allowable investment limit | **Note:** Please indicate below, how much benefit you would like to invest with Nambawan Super Retirement Savings Account - RSA.

K

Section 3: RSA payment option

How would you like to receive a regular income from your Retirement Savings Account?

(Tick box next to your preferred payment options stated below)

Fortnightly payment **K** – To Be effective on: Date:
(For Regular Fortnight income Only)

Lump sum payment **K** – To Be effective on: Date:
(You may only apply for a lump sum withdrawal every six months.)

Section 4: Nominated banking details

Account name	Account number	Bank name	Branch	Account type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 5: Family / Beneficiary details

Name of beneficiary	Beneficiary DOB	Relationship to member	Name of guardian <small>(If beneficiary is below 18 years of age)</small>	# in (%)
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The total percentage for all beneficiaries must add up to 100%. If you run out of space for beneficiaries, please attach a separate nomination list clearly filled out, signed off by yourself; and signed off and stamped by your Human Resources Division. **Total: 1 0 0**

Section 6: Declaration by member

I, certify that all the above information written by me is true and correct.

Signature: Date: