UNEMPLOYMENT INSURANCE ACT 63 0F 2001 APPLICATION FOR DEPENDANT'S BENEFITS BY CHILD/CHILDREN OF DECEASED IN TERMS OF SECTION 31(1) READ WITH REGULATION 7(1) AND 7(2)

A. PARTICULARS OF DECEASED CONTRIBUTOR:				
13 Digit Bar-Coded Identity Document/Passport Number Date of Birth (dd/	mm/yy) Gender			
Date of British	Male 5	Female 0		
First Names Surname	Male 3	remate 0	Date of Death	
First Names Surname			Date of Death	T
Last Residential Address				
Interview 14dd 600	Code			
Details of previous application				
a) Name and ID No under which deceased applied:	b) Date of Applicat	tion: / /	c) Office of application	v.
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B. PARTICULARS OF APPLICANT: RELATIONSHIP OF APPLICANT TO DECEASED:				
B. PARTICULARS OF APPLICANT: RELATIONSHIP OF APPLICANT TO DECEASED:				
13 Digit Bar-Coded Identity Document/Passport Number Date of Birth (dd/mm/yy)	Gender			
	Male 5 Femal	le 0		
First Names Surname				
Postal Address	Codo		Tel No	
	Code			
Residential Address	Code		Cell No	
Occupation Occ. Code	E-Mail Address			
Method of Payment				
·				
Use the UI-2.8 form for Banking Details				
CHEQUE BANK TRANSFER OTHER C. CHILD'S DETAILS:				
First Names Surname				
Home Address Date of Birth (dd/mm/yy)				y)
	Code			
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I declare that the information is true and correct. I understand that it is an offence to make a false statement				
SIGNATURE OF APPLICANT: D.	ATE: / /			
	AIE/		Ī	
FOR OFFICIAL USE ONLY:		_		OFFICE STAMP
DOCUMENTS/INFORMATION SUBMITTED	SIGNATURE OF OFFICIAL	Claim approved from:		
UI-19 (If Applicable) 8. If child is over 21 documentary proof that child is a		Application refused in terms of	:	
2. Certified Copy of ID (Deceased/Applicant & Child)	REMUNERATION/SALARY	Claims officer (Please Print):		
3. Payslips 9. Telephonic Verification		Ciainis officer (Please Print):		
4. Proof of banking details - UI-2.8 Contact Person:	Gross pay Payment Frequency (before deductions) (PW or PM)			
5. Certified copy of birth certificate of child Designation:		Signature:		
6. Supplementary documents proving guardianship and relationship of child to deceased				
7. Certified Copy of ONE of the following documents		Date:		
(i) Death certificate				
(ii) Post-mortem certificate (iii) Burial order relating to the death of such contributor				