

# FundsAtWork Namibia Disability claimant update form

Member number

Please fill in this form in the fields provided. Use the tab key to move from one field to the next.

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## Section 1: Scheme details

In order for us to update our records and to avoid payments being withheld, please complete this form.

Name of employer

## Section 2: Member details

Title  Initial/s  First name

First name

Surname

Date of birth 

D	D	-	M	M	-	Y	Y	Y	Y
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National identity document Yes  No  Identity / Passport number

Passport country of origin

Telephone

Cellphone number

Residential address

Postal Code

Postal address

Postal Code

Email address

Tax Office  Tax number

Have there been any significant changes in your condition? Yes  No

If Yes, please specify

Are you currently employed? Yes  No

If Yes, what is the nature of the work you do?

If No, are you planning to work in any capacity in the future?

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### Section 3: Monthly income details

Please declare your full monthly income.  
Tick the source/s and add the amount.

<input type="checkbox"/>	Momentum disability benefit	N\$	<input type="text"/>
<input type="checkbox"/>	Self employment (own business)	N\$	<input type="text"/>
<input type="checkbox"/>	Unemployment benefit	N\$	<input type="text"/>
<input type="checkbox"/>	Benefit from other insurance	N\$	<input type="text"/>
<input type="checkbox"/>	Pension	N\$	<input type="text"/>
<input type="checkbox"/>	Salary	N\$	<input type="text"/>

### Section 4: Declaration

I hereby declare and warrant that the answers provided by me in this report are true and correct in every respect and that no material information has been withheld, nor have any relevant circumstances been omitted.

<b>Signature</b>	<input type="text"/>	Date <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - 2 0 <input type="text"/> <input type="text"/>
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Completed form together with supporting documents to be +264 61 299 7537 or emailed to [fundsatworknamibia@momentum.co.na](mailto:fundsatworknamibia@momentum.co.na)

**When you sign this form by inserting a digital signature it confirms that the information provided is true and correct.**

#### Options to sign the form:

- Print out the form, sign and scan it and send it back via email to [fundsatworknamibia@momentum.co.za](mailto:fundsatworknamibia@momentum.co.za) or fax it to +264 61 234 851.
- Place your scanned signature in the signature block.
  - Store your scanned signature in a safe place on your computer.
  - Select the 'comments' tab from your menu in Adobe.
  - Select the 'add stamp' icon.
  - Select custom stamps.
  - Create custom stamps.
  - You can now browse and upload your signature to save it as a custom stamp under 'sign here' in Adobe.
  - You can now go back to your 'stamps' icon and select 'sign here' and select your saved signature.
  - Place it in the document and save the document.

When you want to print the form to complete by hand you can turn off the field highlights by selecting the "highlight existing fields" on the top right hand corner of your screen.