

Boresha Maisha Umbrella Retirement Scheme Claim Form



LIBERTY

LIFE INVESTMENTS HEALTH CORPORATE PROPERTIES ADVICE

Liberty Life Assurance Kenya Limited
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 www.libertylife.co.ke

Please ensure that the information required is complete and accurate. Any errors could delay or lead to non payment of benefits.

PERSONAL DETAILS

Name of scheme	<input type="text"/>																							
Policy number	<input type="text"/>																							
Name of member	<input type="text"/>																							
Date of employment(if applicable)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Date of joining scheme	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>								
Date membership is to cease	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Date of last contribution paid	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>									
ID /Passport number	<input type="text"/>																							
	<i>(Attach copy of Identification document)</i>																							
Pin number	<input type="text"/>																							
Postal address (Home)	<input type="text"/>																							
	<input type="text"/>																							
	<input type="text"/>																							
	<input type="text"/>																							
Cell number	<input type="text"/>																							
Email address	<input type="text"/>																							

REASON FOR MEMBERSHIP CEASING (TICK APPROPRAITE BOX)

<input type="checkbox"/> Resignation	<input type="checkbox"/> Termination	<input type="checkbox"/> Emigration	<input type="checkbox"/> Ill-Health
<input type="checkbox"/> Voluntary early retirement	<input type="checkbox"/> Normal retirement	<input type="checkbox"/> Late retirement	<input type="checkbox"/> Death
<input type="checkbox"/> Transfer to another Fund			

PROCESSING BENEFITS

REFUND TO MEMBER

Is a refund to the member required? Yes No

Member's share of refund from employer benefits as per the Trust Deed and Rules %

PURCHASE OF PENSION

Do you require quotations for consideration to purchase pension Yes No

TRANSFER TO LIBERTY LIFE BORESHA MAISHA (INDIVIDUAL PENSION) PLAN

Do you wish your accrued benefits or part of it transferred to an Individual Pension plan? Yes No

If Yes please provide policy no of the Boresha Maisha (Individual Pension) Plan

TRANSFER TO LIBERTY LIFE BORESHA MAISHA (INDIVIDUAL PENSION) PLAN

Retain accumulated contributions in the Scheme until retirement Transfer to another registered Scheme

(Please provide details of receiving scheme in a separate transfer form)

Note: The benefits deferred will accrue interest at normal interest rate and you will receive an annual statement via the Trustees address.

Member signature

PAYMENT OF BENEFITS

Cheque drawn in favour of (Full names)

If payable by Electronic Funds Transfer (EFT) indicate

Account name

Name of bank

Branch name

Account number

Note: The benefits shall only be paid to the provided bank account.

CONFIRMATION (TO BE FILLED BY EMPLOYER)

We confirm the above information is correct as per the records held by ourselves. We absolve the Trustees of the fund for any liability arising from the information.

Name of Authorising officer

Signed by employers authorising officer

Date

ORGANISATION'S STAMP

OFFICIAL USE

Received by

Designation

Date

Verified and processed by

Designation

Date

DOCUMENTATION

- Original Policy Document for Boresha Maisha
- A letter from Trustees/employers for Employer schemes
- Emigration-Trustees/Authorised officer Resolution and proof of permanent relocation
- Death Claim-copy of death Certificate certified by trustees or authorised person
- Ill Health retirement- certified doctors letter
- For unitised funds kindly note that the benefits amount will be equal to the unit prices applicable at the time of withdrawal.