

# MEDBUX PAY-OUT FORM



Tel: +264 83 2999 000

E-mail copy of completed form to: rene.ross@prosperitynam.com

**Please Note: Only fully completed forms will be processed**

## Section A - Policyholder Details

Reference Number		
Policyholder Number	Date of Birth	D D M M Y Y Y Y
First Name	Surname	
Telephone Number	Cellphone Number	
E-mail Address	Product Joining Date	D D M M Y Y Y Y
Postal Address	Termination Date	D D M M Y Y Y Y
Residential Address		

## Section B - Company HR / Finance

MEDBUX Pay-Out to		
Company		
<p>I hereby authorize the balance of MEDBUX Pay-Out account to be paid to the Policyholder.          I also declare that I have the necessary authorization, given to me by the Company to take this decision.</p>		
HR Manager Signature		Company Stamp
Date	D D M M Y Y Y Y	

Please take note that only the balance on the MEDBUX premiums, after deductions for all claims received as well as any premiums in arrears, will be refunded after (6) six months period from resignation date.

Policyholder's Signature	Date	D D M M Y Y Y Y

prosperity-2020

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## Section C - Documentation *(The following documentation should be certified copies / \*verified copy to accompany the application form as per the Financial Intelligence Act 2012 (FIA) where applicable.)*

Namibian Citizen	Yes	No	
ID / Passport of main Policyholder		Birth certificates of children (full birth certificate)	
Proof of banking details (Please attach confirmation from the bank)		Medical certification for over aged dependant (21 years+)	
Marriage certificate when registering a spouse / ID / Passport			
Source of funds:			

### \*Verified Copy

In terms of the Financial Intelligence Act, 2012 (Act 13 of 2012) (FIA Act) in compliance with Section 22 of the FIA Act all documents should be verified, in respect of which we elect to have a certified copy. Brokers/Agents and certain employees may verify/ascertain a copy against the original. To verify a copy without the original is in contravention of the FIA Act and is a criminal offence.

## Section D - Politically Exposed Persons ("PEPs") as per the Financial Intelligence Act 13 of 2012

PEPs are persons who are currently or may have held prominent public function(s) in any country. Where a family member, associate or nominated beneficiary of the proposed policyholder is a PEP, for purposes of this application, you are also a PEP. PEP status is not only relevant to government employees or a person involved in politics. Where you are unclear as to whether yourself or any of your proposed beneficiaries may be a PEP, please inform your broker, advisor or nearest Prosperity Office in order to obtain clarity.

Are you a PEP	Yes	No
Are you or the contact person or any stakeholder (in the case of a legal entity, trust or unincorporated entity) a politically exposed person (PEP)?	Yes	No

Where you have answered "yes" in respect of any of the above, please stipulate the requisite source of funds, being the manner in which income is derived for purposes of legislative compliance (attach source documentation where required).


## For Office Use - Special Project Department

Processed by									
Date	D	D	M	M	Y	Y	Y	Y	Signature