

## Withdrawal of a Member - Retirement/Discharge

#	Forms and Attachments Required  Refer to the rules of the GEP Law:  14.1.1(b): Post Abolished; 14.3.1(a): Normal Retirement; 14.1.1(c) Promote Efficiency, etc; 14.1.1(a) Retire Medical; 14.3.1(c) Contract Expiry; 14.3.1(d) Early retirement 55-60 (downscale); 14.3.1(b) Early retirement <55 (no downscale); 14.3.1(e) Early age Teachers <55	Reason for Retirement / Discharge		
		SEVERANCE PACKAGES (MASP, EIP) AND RES.7 OF 2002)	CONT. EXPIRY, EARLY RETIRE, ILL HEALTH, POST ABOLISHMENT, PROMOTE EFFICIENCY, INCAPABILITY, PREMIER APPOINT, IOD.	ATTAINMENT OF REQUIRED PENSIONABLE AGE
	<b>Tick type of transaction and missing attachment(s) ►</b>			
1.	Duly completed <b>Withdrawal from Fund Form (Z102)</b> .	Attached	Attached	Attached
		Missing Data	Missing Data	Missing Data
2.	An originally <b>certified copy</b> of an <b>ID</b> (must be bar-coded) or <b>ID Card</b> (both sides) or <b>Passport</b> of the <b>member</b> – exceptions as per ID Policy.	Attached	Attached	Attached
		Missing	Missing	Missing
3.	Duly completed <b>Bank Particulars Form (Z894)</b> or for actuarial transfer to an approved external retirement fund a duly completed <b>Z1525 Form</b> for the <b>particulars of approved external retirement fund</b> for transfer of funds.	Attached	Attached	Attached
		Missing	Missing	Missing
4.	Originally certified copies of documentation for <b>proof of Retirement/Discharge</b> :			
a.	Proof of termination of service is required such as a printout of the <b>Service Termination</b> or <b>Service Record</b> from PERSAL stating the Payroll No (PERSAL No), Withdrawal reason, Withdrawal date, Salary level and notch on the last day of service of the member.	Attached	Attached	Attached
		Missing	Missing	Missing
b.	<b>Conditional:</b> For <b>early retirement</b> a copy of <b>letter of approval</b> for early retirement or discharge signed by the Head of an office (Department).	Attached	Attached	
		Missing	Missing	
		N/A	N/A	
c.	<b>Conditional:</b> Discharge due to <b>medical conditions</b> a <b>medical report</b> stating the reason for discharge, applicable section of the act and date of withdrawal.	Attached	Attached	
		Missing	Missing	
		N/A	N/A	
d.	<b>Conditional:</b> For retirement of a <b>Director-General</b> : a copy of the <b>service contract(s)</b> .		Attached	Attached
			Missing	Missing
			N/A	N/A
e.	<b>Conditional:</b> For <b>service contract(s) expiring</b> : a copy of the <b>service contract(s)</b> .		Attached	Attached
			Missing	Missing
			N/A	N/A
f.	<b>Conditional:</b> For <b>IOD Cases</b> a copy of the <b>medical report</b> confirming the IOD.		Attached	Attached
			Missing	Missing
			N/A	N/A
5.	<b>Conditional:</b> For <b>debt deduction</b> : An originally certified copy of a <b>Court Order</b> or Member's approval in writing for debt - Section 21.3(c)	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
6.	<b>Conditional:</b> For members with more than 10 years of pensionable service: Duly completed <b>GEPF Spouse's Choice</b> form where a once-off irrevocable choice is made for future <b>pension for a widow</b> upon the death of the member (even if the member is not currently married).	Missing	Attached	Attached
		N/A	Missing	Missing
		N/A	N/A	N/A

**Validation of Documentation Required**

7.	<b>Conditional:</b> A duly completed GEPF Choice Form for <b>Severance Packages (Res. 7 of 2002)</b> or signed letter for other packages from the member.	Attached		
		Missing		
		N/A		
8.	Duly completed <b>Updating Personal Particulars of Member Form (Z864)</b> .	Attached	Attached	Attached
		Missing	Missing	Missing
9.	<b>Conditional:</b> When a <b>spouse</b> is registered an originally <b>certified copy</b> of the <b>Marriage Certificate</b> is required or alternatively the required <b>affidavit(s)</b> for consideration. For a <b>Life Partnership: affidavits</b> setting out the nature of the relationship, and indicators, (preferably with supporting documentation), of that relationship from a member of each party's family, a joint friend and/or an authorised member of any organisation, institution or society of which one or both parties has been a member.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
10.	<b>Conditional:</b> Where the member had a <b>previous marriage</b> , an originally certified copy of the former spouse's <b>ID</b> (must be bar-coded) or <b>Passport, Marriage Certificate, Death Certificate, Settlement Agreement</b> and/or <b>Decree of Divorce</b> are needed. Where payments are due to an ex-spouse, a <b>Bank Particulars Form (Z894)</b> is needed. Divorce Settlement Agreements for the division of pension interest <b>are only effective from 1 August 1989 as per the amendment to the Divorce Act</b> and a separate <b>Withdrawal from Fund Form (Z102)</b> completed by the employer is needed.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
11.	<b>Originally certified copies</b> of the member's <b>last two salary advices</b> printed from the payroll system.	Attached	Attached	Attached
		Missing	Missing	Missing
12.	<b>Conditional:</b> For when the Commencement Date ( <b>Service Date</b> ) is amended, then proof of contributing service is needed in the form of a copy of an appointment advice to the salary department, salary / leave record, staff record, pay slips, or IRP 5 tax certificates for the applicable years. A duly <b>completed Membership Update Form (Z125)</b> is also required.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
13.	<b>Conditional:</b> For when the <b>surname</b> of the person is different to the surname on the <b>ID or Passport</b> documents, a letter from the Department of Home Affairs or Full Birth Certificate of a child is required to confirm the surname.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
14.	<b>Medical Subsidy Specific Attachments Required:</b>			
a.	An <b>originally certified</b> copy of the existing medical scheme <b>Membership Certificate</b> (and new Membership Certificate for medical scheme transfers) of the contributing member that is registered as the main medical scheme member.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
b.	<b>Conditional:</b> An <b>affidavit</b> or an <b>originally certified</b> copy of the <b>service records</b> to prove additional periods of broken government service that need to be added for medical subsidy purposes to prove 10 or 15 years of government service.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A
c.	<b>Conditional:</b> For a contributing member, pensioner or spouse that choose a gratuity payment, a duly completed Updating Bank Particulars Form - Z894.	Attached	Attached	Attached
		Missing	Missing	Missing
d.	A duly completed <b>State Subsidised Medical Contribution Choice Form</b> to choose between continued memberships (4/6 GEPF subsidised) or the payment of an once-off gratuity.	Attached	Attached	Attached
		Missing	Missing	Missing
		N/A	N/A	N/A

*This checklist is a guideline and is subject to the requirements stipulated in the relevant Acts, Regulations and rules applicable. Please confirm and adhere to the instructions and rules that will be applicable to the specific exit type on date of exit.*

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