



# Fiji Bank & Finance Sector Employees Union

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## RETIREMENT BENEFIT APPLICATION FORM

<b>Claim Made By:</b>	Name: Date of Birth: Mobile Contact: Date of Application:
<b>Employer:</b>	
<b>Date of Retirement from Employer:</b>	
<b>Bank Account Details:</b>	Name of Bank: Name of Account: Account Number:

### FOR OFFICE USE ONLY

<b>Years of Membership:</b>	
<b>Benefit Amount:</b>	
<b>Pre-qualification requirement submitted</b>	Retirement/Redundancy/De-establishment Letter ID ( <b>Voter ID/Driving License</b> ) of Benefit Recipient
<b>Retirement Benefit Budget As at</b>	Retirement Benefit Budget per year: Retirement Benefit Current balance: Payment amount: Remaining Balance:
<b>Prepared By:</b> <b>Date:</b>	<b>Checked By:</b> <b>Date:</b>
<i>Approval is at the discretion of the FBFSEU National Secretary upon recommendation of the Administration Secretariat in accordance with the policy guideline.</i>	
<b>FBFSEU National Secretary Comments &amp; Recommendation:</b>	<input type="checkbox"/> Approve <input type="checkbox"/> Decline    Comments  Signature: Date: