PPS PROFESSIONAL LIFE PROVIDER™ PRODUCT (PLP)/PPS ACCIDENTAL DEATH BENEFIT/ LIFE ASSURANCE(LA)/PPS PROFIT-SHARE ACCOUNT (ESTATE BANKING PARTICULARS FORM)

INSURANCE NAMIBIA

The Professional Provident Society Insurance Company (Namibia) Limited Reg. No 2003/122 is a registered long-term insurance provider regulated by the Namibia Financial Institutions Supervisory Authority. Any reference to PPS in this form means PPS Insurance (Namibia)

PPS Insurance (Namibia) Claims:
Email: namibiaclaims@pps.co.za
Fax: +264 (0) 61 411 330
Queries: namibiaclaims@pps.co.za
Phone: +264 (0) 61 411 300 **Monday to Friday** 07:30 to 16:30
Fax: +264 (0) 61 411 330

Estate Late:

Member number:

PART A: ESTATE PARTICULARS

Estate number or Master's reference number:

Details of Master's office where estate was reported:

Address and contact details of executor:

PART B: PAYMENT INSTRUCTIONS DUE TO ESTATE

IMPORTANT- Please take note that in terms of the PPS Insurance (Namibia) Provider™ Policy, premiums from the policyholder should be paid from a Namibia bank account and benefits to the policyholder should also be paid into a Namibian bank account, in Namibian currency. Accordingly, PPS Insurance (Namibia) assumes no responsibility or liability whatsoever in the event that the policyholder pays premiums from a foreign bank account or the policyholder nominates a foreign bank account for receipt of policy benefits. Furthermore, any payment to and from PPS Insurance (Namibia) involving a foreign bank shall be at the sole discretion of PPS Insurance (Namibia) and subject to the Namibian exchanges regulations and other relevant legislation as amended from time to time. PPS Insurance (Namibia) assumes no responsibility or liability to inform the policyholder of any changes in such regulations and legislation.

I (full names):

Executor of the estate for the late hereby authorise PPS Insurance (Namibia) to make an electronic payment in the following estate bank account

Account in the name of:

Account type:

Account number:

Name of bank:

Branch code:

Branch:

PLEASE PROVIDE

PPS Insurance (Namibia) with a proof of account and certified proof of the account holder's identity. The accepted proof of account is a bank-stamped letter on the bank's letterhead not older than three months. In addition a certified copy of the official letter of executorship issued by the Master's office as well as a certified copy of the ID document of the person acting as executor.

INDEMNITY

PLEASE NOTE

PPS Insurance (Namibia) will not be held liable for any incorrect payments, if the information provided on this form is not correct in all respects. I certify that the above information is correct.

Signed at this day of 20

Full name and surname of the executor:

Signature: