



UNTU

UNITED NATIONAL TRANSPORT UNION

MATERNITY BENEFIT APPLICATION

Please note!!! All claims must be submitted within twelve (12) months of the occurrence - [NO EXCEPTIONS WILL BE MADE]

[PLEASE COMPLETE ALL FIELDS IN CLEAR PRINT]

MEMBER'S DETAILS:

Name and Surname:

Pension no: SAP no:

Date of Birth: ID. No:

Address:

.....

Contact numbers: Work)..... Home)..... Cell).....

E-mail:

OPERATING DIVISION: (MARK WITH X)

PRASA - Metrorail		Transnet Port Terminals (TPT)		Transnet Freight Rail (TFR)		Bombela	
PRASA - MLPS		Transnet National Ports Authority (TNPA)		Transnet Properties		Bombardier	
PRASA - CRES		Transnet Group Capital (TGC)		Transnet Corporate		Mega Express	
PRASA - Technical		Transnet Engineering (TE)		Transnet Pipelines (TPL)		OTHER	

BABY'S DETAILS:

Baby's name: Baby's date of birth :

BANKING DETAILS:

Bank: Branch:

Account no: Branch code:

Signature

Date

PLEASE SUBMIT COMPLETED FORM AND RELEVANT DOCUMENTS TO:

The General Secretary, P.O. Box 31100, Braamfontein 2017; Fax: 011 728 8258 or Internal Fax: 011 773 7920; E-mail: headoffice@untu.co.za

Attach clear certified copies of the following documents:

- ✓ **Members' ID**
- ✓ **Baby's birth certificate**
- ✓ **Proof of banking details (e.g. paysheet or bank statement)**