

## APPLICATION FOR REFUND OF UNCLAIMED MONIES BY A CREDITOR

A. PARTICULARS OF	F APPLI	CANT	•										
Full names & Surname:													
ID number:													
Residential address:													
Postal address:													
Tel number (Work):	Code			Numbe	er								
Tel number (Home):	Code			Numbe	er								
Fax number (if any):	Code			Numbe	er								
Cell number:													
E-mail address:													
Certified copy of bar-ce	oded Id	entity	Book	with tw	o thum	bprint	s to be	subm	itted.				
B. PARTICULARS FR	ROM WE	HICH E	STAT	ΓE									
Full Names and Surname o (if applicable):	of decea	sed											
Name of Insolvent Estate / Company in Liquidation (if applicable):													
Date of death of deceased (If Applicable) :													
Place of death of Deceased	d: (If Ap	plicabl	e):										
Date of Sequestration/Liqui (If applicable):	dation C	Order:											
Amount of claim:													
Estate reference number (If	f availab	le):											
GF File (if available):													
C. DECLARATION													
I, the undersigned, declare					-							n and th	nat the
particulars stated in this app	olication	are tr	ue and	d correct	as to th	ne best	of my k	knowle	edge and	d belief.			
DA	TE						SIGNA	ΓURE	OF APF	PLICAN	Т		
				-									
						F	PRINT	NAME	AND S	URNAM	1E		

D. DECLARATION AND CERTIFICATE OF IDENTITY BY LIQUID	DATOR / TRUSTEE / EXECUTOR)					
I, the undersigned Depositor / Executor / Liquidator / Trustee of Insolvent Estate / Company in Liquidation / Estate Late						
	NO:					
Have deposited the amount(s) of R						
to the credit of:	ID NO:					
in your Guardian Fund.						
I have / have not satisfied myself that the person who signed the above application is entitled to the funds claimed which were deposited in the Guardian Fund.						
PLACE:	DATE:					
	SIGNATURE					
	PRINT NAME AND SURNAME					

## E. NOTE:

## TRACING AGENTS:

A practise whereby persons search the registers of unclaimed monies, seek out the persons entitled thereto and obtain cession of their rights is prohibited by a direction of the Minister of Trade and Industry in terms of the <u>Harmful Business Practice Act 71 of 1988</u>. Notice 69 of 1965 (Gazette 16193 of 27 January 1995) declaring unlawful any agreement whereby a person cedes to any person charges, sets off against any debt or alienates in any other manner, his right or title to any claim against the Guardian's Fund. Any person is prohibited for instituting a claim in any Court of law based on such an unlawful agreement. Therefore, if money is claimed on behalf of a person / institution by a trading agent the cheque must still be made payable to the person / institution reflected in our records.

5% Commission will be deducted from the amount available to creditor (Applicant).

FOR	APPLICATION APPROVED/NOT APPROVED	COMMENTS				
OFFICE						
USE	PRINT NAME AND SURNAME	DATE	SIGNATURE			
ONLY						

<sup>\*\*</sup> NB: ALL DETAIL REQUESTED ON THIS FORM MUST BE COMPLETED IN FULL.
YOUR OMISSION TO DO SO WILL RESULT IN YOUR INCOMPLETE FORM BEING RETURNED TO YOU.