



Your No. 1 Pension Fund

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REQUEST TO PARTICIPATE IN TWO-POT RETIREMENT SYSTEM

Members who were 55 years and older on 01 March 2021 and wishes to opt -in to the two-pot retirement system effective 1 September 2024 are required to instruct the Fund by completing the opt in form. The purpose of this form is to instruct the Fund that you wish to opt-in to the two-pot retirement system.

MEMBER'S PERSONAL DETAILS			
Surname			
First Names			
Identity Number			
Date of Birth			
Tax Number			
Pension Number		Tax Number	
Job Designation		Employee Number	
Email address			
Cell phone no.		Alternative contact	
Local authority			
Residential address			

I hereby elect to participate in the two-pot retirement system

NB: Members who participate in the two-pot retirement system forfeit their continued rights from the date of election

Declaration by member

I hereby confirm that:

1. The information provided is true and correct.
2. The decision to participate in the two-pot retirement system is my choice and is not influenced by the Fund or the Administrator.

I am aware and understand that participating in the two-pot retirement system will result in me forfeiting my continued vested rights.

Member's Initial and Surname _____

Member's signature _____ Date _____

Important to Note:

- This form (including a certified Id copy) must be sent to the Fund prior to sending two-pot claim forms.
- Once the election is made, it cannot be reversed.
- Election forms must be sent to pension@mepf.co.za