

Appointment of Agent

For Service Pension

Details of Beneficiary

Identity Card Number * _____
Name * _____ Surname * _____
Beneficiary's Signature * _____

Agent Details

Identity Card Number * _____
Name * _____ Surname * _____

Contact Details

Number / House Name * _____ Street Name * _____
Locality * _____ Post Code * _____
Contact Number * _____ Email _____

I, the undersigned, undertake to immediately inform the Service Pensions Section of any change in the Beneficiary's circumstances.

Agent's Signature * _____

Witness Details ¹

Identity Card Number: * _____ Profession: * _____
Name: * _____ Surname: * _____

I hereby declare that the authorisation of the beneficiary and the agent's obligations were signed / marked in my presence.

Rubbert Stamp

Witness's Signature * _____ Date * _____

¹ Those listed here may act as a witness: Priest, Doctor, University Graduate, Parliament Member, Bank Manager, Public Officer grade not less than a Principal or a Police Officer grade not less than an Inspector.