



EARLY WITHDRAWAL FORM - INVESTMENTS YOUNGER THAN 1 YEAR

PLEASE WRITE THE DETAILS IN BLACK AND WHERE APPLICABLE IN CAPITAL LETTERS.

GROUP DETAILS

Group Name: _____

Contact Number: _____ Email Address: _____

Investor Number Investment Date

EARLY WITHDRAWAL DETAILS - *(Tick the appropriate option)*

Top Up Retail Savings Bond:

Three Year

Amount in Figures: R

Amount in words: _____ Rands

What is the extraordinary change in your circumstances that causes you to make this withdrawal: *(please give a detailed reason)*

BANKING DETAILS

Bank Name: _____ Account No.

Type of Account: _____ Branch Name: _____ Branch Code:

NOTE:

National Treasury shall not accept banking details of third parties or any representative. Where bank details have changed, please attach a Bank Stamped copy of your bank statement or confirmation letter from your bank not older than 3 months.

The Penalty levied on an early withdrawal amount that is younger than 1 year, shall be the forfeiture (loss) of all the interest on that early withdrawal amount.

Payments under this option require approval, and shall take 3 working weeks to be fully processed and paid. No payments shall be made after the 20th of each month. Change of bank details may affect turnaround times for your withdrawal request to be processed.



nationaltreasury

Department:
National Treasury
REPUBLIC OF SOUTH AFRICA



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INFORMAL GROUP

Full Names _____

Signature _____

Date _____

ID Number:

Designation _____

Full Names _____

Signature _____

Date _____

ID Number:

Designation _____

Full Names _____

Signature _____

Date _____

ID Number:

Designation _____