

BENEFICIARY CLAIM FORM

Passport
Picture

Please complete this form in BLOCK LETTERS. Kindly send a copy of this form to info@psweeps.gov.gh/support@psweeps.gov.gh or deliver a hard copy to the PSWEPS office on the Mezzanine Floor, NDK Building, 28th February Road, Christianborg Osu, Accra.

SECTION A - MEMBER DETAILS

Member's Full Name			
Name of Institution			
Date of Birth (DD/MM/YYYY)			
SSNIT Number			
Staff ID			
ID Type:		ID Number:	
Date of First Contribution			
Date of Last Employment			

SECTION B - BENEFICIARY DETAILS

Name of Beneficiary			
Relationship to Member			
Reason for Claiming Tier 2 Benefit	<input type="checkbox"/> Death	<input type="checkbox"/> Other	
Full Postal/ Email Address			
Contact Number (s)			
<u>Bank Details of Beneficiary 1</u>			
Name of Bank			
Account Holder Name			
Account No.			
Branch			
<u>Bank Details of Beneficiary 2</u>			
Name of Bank			
Account Holder Name			
Account No.			
Branch			
<u>Bank Details of Beneficiary 3</u>			
Name of Bank			
Account Holder Name			
Account No.			
Branch			

Signature _____ Date _____

SECTION C – INSTITUTION HR/ ADMIN VERIFICATION

Date of Joining Scheme	
Employer's Scheme Code	
Last Date of Employment	
Reason for claim if different from above	<input type="checkbox"/> Death <input type="checkbox"/> Other _____

I certify that the above information is correct and have the mandate to approve payment.

Name Position Signature and Stamp Date

Kindly refer to Page 2 for requirements

DEATH BENEFIT PROCESSING REQUIREMENTS

- A cover letter from employer.
- A copy of death certificate.
- Where a member listed beneficiaries on the GENTRUST Contributor Enrollment Form (CEF), payment will be processed for listed beneficiaries.
- Beneficiary Nomination (from HR) and account details where member did not provide beneficiaries on our CEF.
- Front and back copy of Ghana (ECOWAS) card of beneficiaries.

Where no beneficiaries were nominated;

- Letters of Administration/Probate (Will).
- Contact details of executors/ Administrators.
- Front and back copy of Ghana (ECOWAS) card of beneficiaries/ executors.
- Letter of disbursement of funds (Allotted Percentages).

Where beneficiary is a minor;

- Declaration from court (by dependent).
 - Account details of dependent.
 - Passport picture of minor.
 - Copy of birth certificate of minor.
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- Attach copy of SSNIT Payment Advice/ Statement(s).
 - Attach copy of Cheque leaf/a filled PSWEPS Form A1.