

SECURE WEB APPLICATION FORM

The purpose of this form is for you, the member, to request access to your data from the fund's secure website. An employer may also be granted access to view certain records.

NOTE: 'MACRO' ACCESS WILL ONLY BE GRANTED IF AUTHORISED BY A WEB GATEKEEPER

ACCESS LEVEL

Please indicate the access level for which you are applying:

- * MACRO ACCESS - view all employee records (applicable to employers only)
- * MICRO ACCESS - view my records only (applicable to members only) *

COMPLETE SECTIONS A & B
COMPLETE SECTION A ONLY

SECTION A: TO BE COMPLETED BY THE MEMBER/APPLICANT

Name of employer			
Fund membership number if applicable		Employee number	
Surname		First names	
Date of birth		Identity number	
Physical address			
			Postal code
Postal address			
			Postal code
Home ☎ no.		Work ☎ No.	
Cell phone no.		Email address	

SECTION B: TO BE COMPLETED BY AN AUTHORISED WEB GATEKEEPER AT YOUR EMPLOYER

I, the undersigned, confirm that the MACRO ACCESS requested is essential for the applicant to perform the duties assigned to him/her. I hereby authorise this application.

Full name of authorised official of the employer

Work ☎ no. Email address

Signature of authorised official of the employer

Date

EMPLOYER STAMP:

NOTE

- Only the original form will be accepted, no photocopies.
- Your password is unique and should under no circumstances be given to any person.
- Your employer's appointed Web Gatekeeper may revoke your password privileges at any time.