

Instructions from.....(name of principal)
to Robert J Koch, Actuary, Cape Town
Our ref:
RAF ref (if applicable):
Our contact person:

LOSS OF SUPPORT CLAIM (Form A)

DEATH OF.....
Date of birth:../.../... Date of accident: ../.../... Date of death: ../.../...
Sex: male/female
Marital status: married/single/divorced/widowed
Occupation:Attach evidence of earnings (use Form B)

SPOUSE:
Date of birth:../.../... (Date of remarriage:../.../... if any)
Nature of 1st marriage (CoP, ANC, customary union, 2 wives, etc.)
Occupation:..... Attach evidence of earnings (Form CE94)

CHILDREN:First name	Date of Birth		
1./.../...	5./.../...
2./.../...	6./.../...
3./.../...	7./.../...
4./.../...	8./.../...

DEPENDENT PARENTS
1. Father
Occupation:Attach details of earnings/pension/assets
2. Mother
Occupation: Attach details of earnings/pension/assets

OTHER DEPENDANTS: (any other persons factually dependent on the deceased regardless of whether they have a right to support or not)

Name	Date of Birth	Relationship	Income Rpy
1./.../...
2./.../...
3./.../...

INTERIM PAYMENTS? Date ../.../... Amount R.....
IS CLAIM LIMITED? YES/NO Limit R.....

- ADDITIONAL DOCUMENTATION REQUIRED (where applicable)
1. DETAILS OF ASSETS AND LIABILITIES OF DECEASED.
 2. DETAILS OF ASSETS AND LIABILITIES OF SURVIVING SPOUSE.
 3. WORKMEN'S COMPENSATION CERTIFICATE.
 4. MEDICAL REPORT (if mortality of deceased/dependant not normal).
 5. AFFIDAVITS
 - 5.1. If dependants did not live with deceased in common household:
If divorced - LAST SUPPORT PROVIDED and COPY OF DIVORCE ORDER
If not yet married - SUPPORT PROVIDED AT DEATH and PLANS FOR MARRIAGE
 - 5.2. Where couple were young - PLANS FOR FUTURE CHILDREN and FUTURE EMPLOYMENT OF WIFE DURING SUBSISTENCE OF MARRIAGE (NB fact that wife ceases employment after death, or takes up employment, is not relevant to claim if this would not have happened had there been no death).

For greater detail see Koch `Reduced Utility of a Life Plan' pp 273-351.
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