

# FUNERAL CLAIM FORM



To claim, please complete this form and send it back to us by email, or hand it in at your nearest Safrikan Client Services Branch as follows:

Email: Retail Claims (individual business) is to be submitted to [services@safrikan.co.za](mailto:services@safrikan.co.za)  
Group Claims for ARL Business is to be submitted to [groupclaims@safrikan.co.za](mailto:groupclaims@safrikan.co.za)  
Group Claims for Safrikan Business is submitted to [safclaims@safrikan.co.za](mailto:safclaims@safrikan.co.za)

Head Office Address: Safrikan House, 21 9<sup>th</sup> Street, Houghton Estate 2198

Attach the following minimum documents to the completed claim form:

1. Proof of identity of the policyholder or claimant (copy of ID or copy of birth certificate or copy of passport);
2. Proof of identity of the deceased (copy of ID or copy of birth certificate or copy of passport);
3. Proof of banking details;
4. Copy of death certificate of the deceased;
5. Fully completed police report if the cause of death is unnatural; accidental; or suicide; and
6. Copy of BI-1663 or DHA-1663 or BI-1680.

\*Kindly note that additional documents may be required dependant on the type and merits of the claim. Please refer to Annexure A or contact us for further assistance.

Administrator/Intermediary Name \_\_\_\_\_  
Scheme Name Moeks Funeral Directors Scheme Number 5025633  
Boek 2

A. Details Of Policy Holder / Claimant  
Full Names & Surname Lindene Suzanne Isaacs Policy Number \_\_\_\_\_  
ID/ Passport number 8704290174084 Date of Birth 1987/10/29  
Relationship to the deceased Sister - In Law Contact number \_\_\_\_\_  
Email \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Postal Code \_\_\_\_\_

B. Details Of Deceased  
Full Names & Surname Dirk Tier  
Date of Birth 1952/02/09 Date of Death 2024/11/08

C. Bank Account Details To Which Policy Benefits Must Be Paid  
Name of account holder Moeks Funeral Directors ID Number \_\_\_\_\_  
Bank name F.N.B Branch name Upington  
Account number 63026517095 Branch code 230604

Account type:  Savings  Cheque  Transmission  
 L. Isaacs Signature Of Claimant Date 2024/11/12

D. Declaration By Claimant  
I hereby indemnify Safrikan against all claims by any party for any benefits or monies, loss or damages incurred or suffered, in respect of, or caused by, any representation made by me to Safrikan and/or the payment by Safrikan to the above-named beneficiary of any claim in respect of the deceased's death. I further confirm that I am the authorized person to claim any policy benefits due under the above-mentioned policy.  
The validity of this claim is subject to the fulfillment of party due diligence obligations of Safrikan Insurance Company Limited under the provisions of the Financial Intelligence Centre Amendment Act conducted on the identity of client(s) or persons acting on behalf of clients as well as beneficiaries, premiums payers and beneficial owners of juristic persons where applicable.  
 L. Isaacs Signature Of Claimant Date 2024/11/12

Your policy is underwritten by Safrikan Insurance Company Limited, a licensed insurer conducting life insurance business and authorized Financial Services Provider FSP number 16123. www.safrikan.co.za  
Safrikan is authorized to sell the following products: Long-term Insurance; Subcategory A, B1, B2; Safrikan Total Professional Indemnity and Fidelity Insurance cover.  
©2024, Safrikan Funeral Claim Form

Id: 5202095210 081











home affairs

Department:  
Home Affairs  
REPUBLIC OF SOUTH AFRICA

5571181

83/DHA-5

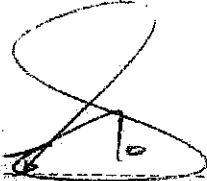
PARTICULARS FROM THE POPULATION REGISTER I.R.O.:

ABRIDGED  
DEATH CERTIFICATE

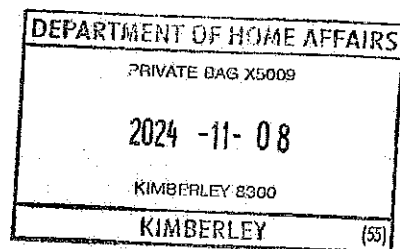
IDENTITY NUMBER: 520209 5210 08 1  
SURNAME: TIER  
FIRST NAMES: DIRK  
DATE OF BIRTH: 1952-02-09  
GENDER: MALE  
MARITAL STATUS: MARRIED  
DATE OF DEATH: 2024-11-08  
PLACE OF DEATH: HOPETOWN  
CAUSE OF DEATH: NATURAL CAUSES

DATE OF ISSUE: 2024-11-08

ISSUED BY: YCJ237

  
T.V. SEBOKO


DIRECTOR-GENERAL: HOME AFFAIRS



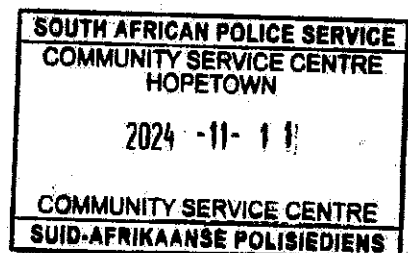
SJA

IK SERTIFISEER DAT HIERDIE DOKUMENT 'N WARE AFDRUK (AFSKRIF) IS VAN DIE OORSPRONKLIKE DOKUMENT WAT AAN MY VIR WAARNEMING VOORGELE IS. EK SERTIFISEER VERDER DAT, VOLGENS MY WAARNEMINGS, DAAR NIE 'N WYSIGING OF VERANDERING OP DIE OORSPRONKLIKE DOKUMENT AANGEBRING IS NIE.

I CERTIFY THAT THIS DOCUMENT IS A TRUE REPRODUCTION (COPY) OF THE ORIGINAL DOCUMENT WHICH WAS HANDED TO ME FOR AUTHENTICATION. I FURTHER CERTIFY THAT, FROM MY OBSERVATIONS, AN AMENDMENT OR A CHANGE WAS NOT MADE TO THE ORIGINAL DOCUMENT.

  
HANDTEKENING/SIGNATURE

NUMMER 17865850 RANG JUT  
IN DRUKSKRIF LESTAY RANK  
IN PRINT



**REPUBLIC OF SOUTH AFRICA  
NATIONAL IDENTITY CARD**

Surname: **TIER**  
 Names: **DIRK**  
 Sex: **M**  
 Nationality: **RSA**  
 Identity Number: **5202095210081**  
 Date of Birth: **09 FEB 1962**  
 Country of Birth: **RSA**  
 Status: **CITIZEN**

**UNABLE TO SIGN**

DAT HIERDIE DOKUMENT 'N WARE AFDRUK (AFSKRYF) VAN DIE DOKUMENT WAT AAN MY VIR WAARNEMING VOORGELEë IS. VERDER DAI VOIGENS MY WAARNENINGS, DAI NIE 'N VERANDERING OP DIE OORSPRONKELIKE DOKUMENT KANGE-  
 THIS DOCUMENT IS A COPY OF THE ORIGINAL DOCUMENT. I FURTHER CERTIFY THAT I HAVE NOT MADE ANY AMENDMENTS OR A CHANGE WITHOUT MADE TO THE ORIGINAL DOCUMENT.

MAGSNOMMER / FORCE NUMBER: **17009550**  
 NAAM IN DRUKSKRIF / NAME IN PRINT: **Dirk Tier**

**SOUTH AFRICAN POLICE SERVICE  
COMMUNITY SERVICE CENTRE  
HOPETOWN**

**2024 -11- 11**

**COMMUNITY SERVICE CENTRE  
SUID-AFRIKAANSE POLISIEDIENS**

Conditions: This card has been issued by the Department of Home Affairs in terms of the Identification Act, Act 68 of 1997  
 Date of Issue: **27 FEB 2023**

If found please return to the Department of Home Affairs  
 For enquiry or verification purposes contact 0800 60 11 90


120158463





**REPUBLIC OF SOUTH AFRICA**  
**NATIONAL IDENTITY CARD**



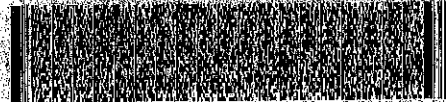
Surname: ISAACS  
 Names: LINDENE SUZANNE  
 Sex: F  
 Nationality: RSA  
 Identity Number: 8704290174084  
 Date of Birth: 29 APR 1987  
 Country of Birth: RSA  
 Status: CITIZEN



Signature: L. Isaacs

Condition: This card has been issued by the Department of Home Affairs in terms of the Identification Act, Act 89 of 1997.  
 Date of Issue: 11 MAR 2016  
 If found please return to the Department of Home Affairs. For an enquiry or verification purposes contact 0800 60 11 80.

101549498

**EK SERTIFISEER DAT HIERDIE DOKUMENT 'N WARE AFDRUK (AFSKRIF) IS VAN DIE OORSPRONKLIKE DOKUMENT WAT AAN MY VIR WAARNEMING VOORGELE IS. EK SERTIFISEER VERDER DAT, VOLGENS MY WAARNEMINGS, DAAR NIE 'N WYSIGING OF VERANDERING OP DIE OORSPRONKLIKE DOKUMENT AANGEBRING IS NIE.**  
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HANDTEKENING/SIGNATURE: *J. Stoffberg*  
 MAGSNOMMER / FORCE NUMBER: 0428245-9  
 NAAM IN DRUKSKRIF / NAME IN PRINT: J. STOFFBERG

**SOUTH AFRICAN POLICE SERVICE**  
**COMMUNITY SERVICE CENTRE**  
**HOPETOWN**  
 2024 -11- 07  
**COMMUNITY SERVICE CENTRE**  
**SUID-AFRIKAANSE POLISIEDIENS**



**eStamp**  
**Verw1175533478425697**  
**2024/11/11**  
 Om hierdie staat te bevestig, skakel  
**08600 08600** en kies opsie 5  
**Absa Bank Bpk**

**SPAAR REKENINGSTAAT**

TERMINAL : HOPETOWN BRANCH1  
 DATE : 2024/11/11  
 SEQUENCE NUMBER : 008514  
 CARD NUMBER : \*\*\*\*\*8583

TERMINAL NUMBER : 13914  
 TIME : 13:09:16

MEV LS ISAACS  
 427 ANGELIER STR  
 HOPETOWN  
 8750

REKENING NOMMER : 0093 6154 5669  
 REKENING STATUS : OOP  
 SALDO : 8.85+  
 BESKIKBARE SALDO : 0.00+  
 TOTALE OPGEL. FOOT : 20.00-

STAAT VIR PERIODE 01/09/2024 TOT 11/11/2024

DATUM	TRAN BESKRYWING	VERWYSING	BEDRAG	SALDO
	SALDO OORGEDRA			16.75+
03/09/24	ADMIN FOOT	HOPETOWN	0.00+	16.75+
	ADMINISTRASIE FOOT		5.50-	11.25+
05/09/24	KENNISGEW/FOOI SMS	NOTIFYME	0.00+	11.25+
	KENNISGEWING SMS =	0003		
	KENNISGEWINGS FOOT		1.80-	9.45+
23/09/24	DIREKTE KREDIET	SETTLEMENT/C	370.00+	379.45+
	NRMLSASSA NC 656759790			
24/09/24	OTM ONTTREKKING	HOPETOWN BRA	300.00-	79.45+
	TRANSAKSIE FOOT		10.00-	69.45+
	KAART NR. 8187			
26/09/24	POS AANKOPE	SETTLEMENT/C	46.00-	23.45+
	426713356268 s*BanglaCashnCarr			
	(EFFEKTIEF 23/09/24)			
	KAART NR. 8187			
03/10/24	ADMIN FOOT	HOPETOWN	0.00+	23.45+
	ADMINISTRASIE FOOT		5.50-	17.95+
04/10/24	KENNISGEW/FOOI SMS	NOTIFYME	0.00+	17.95+
	KENNISGEWING SMS =	0003		
	KENNISGEWINGS FOOT		1.80-	16.15+
23/10/24	DIREKTE KREDIET	SETTLEMENT/C	370.00+	386.15+
	NRMLSASSA NC 674383996			
23/10/24	OTM ONTTREKKING	HOPETOWN BRA	270.00-	116.15+
	TRANSAKSIE FOOT		10.00-	106.15+
	KAART NR. 8187			
24/10/24	OTM ONTTREKKING	HOPETOWN BRA	70.00-	36.15+
	TRANSAKSIE FOOT		10.00-	26.15+
	KAART NR. 8187			
26/10/24	POS AANKOPE	SETTLEMENT/C	10.00-	16.15+
	429804251606 s*Movingshop			
	(EFFEKTIEF 24/10/24)			
	KAART NR. 8187			
03/11/24	ADMIN FOOT	HOPETOWN	0.00+	16.15+
	ADMINISTRASIE FOOT		5.50-	10.65+
05/11/24	KENNISGEW/FOOI SMS	NOTIFYME	0.00+	10.65+
	KENNISGEWING SMS =	0003		
	KENNISGEWINGS FOOT		1.80-	8.85+
11/11/24	VOL STAATNAVRAAG	HOPETOWN BRA	0.00+	8.85+
	STAATFOOI		20.00-*	8.85+
	KAART NR. 8583			
	OPGELOPE RENTE	OP 11/11/24	0.00+	
	OPGELOPE BONUS	OP 11/11/24	0.00+	

EINDE VAN NAVRAAG

11/11/24

0093 6154 5669

KRY MAANDELIKSE ESTATE PER E-POS TEENBLADEN EN EKSTRA KOSTE NIE. BESOEK ABSA.CO.ZA  
 \*\*\* EINDE VAN STAAT \*\*\*

**Stop Card / Stopkaart 0800 11 11 55**

Absa Bank Limited/Beperk Reg No 1986/004794/06

Authorised Financial Services Provider/Cemagtigde Finansiële diensteverskaffer

Registered Credit Provider/Geregistreerde Kredietverskaffer Reg No NCRCP7