



# FSCA

Financial Sector  
Conduct Authority

## FSCA Unclaimed Benefits Query Process



# Outline

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- Tracing of members and beneficiaries
- Who can claim
- The role of FSCA
- What must you do to access your unclaimed benefit?
- Required Documentation
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# Unclaimed Benefit Process

## What are unclaimed benefits?

It is defined in the Pension Funds Act 24 of 1956 as any benefit not paid by a fund to a member, former member or beneficiary within 24 months of the date on which it in terms of the rules of the fund, became legally due and payable.

## What are unclaimed benefits?

A “surplus” means the value of those assets of a fund which are in excess of the value of the actuarial liabilities of the fund to its members at any given time (7 December 2001).

## Tracing of members and beneficiaries

- Trustees as the controlling body of retirement funds have a responsibility to trace members and beneficiaries of retirement funds.
- A fund may use the services of the administrator or contract with a tracing agency to trace the members. However, the ultimate responsibility lies with the fund/trustees.

## Who can claim an unclaimed benefit?

- The person must have been employed.
- The person must have been a member of a retirement fund by virtue of paying contributions to a retirement fund.
- The person must not have received their full retirement benefit due to them when they left their employment (resigned, retired, retrenched, disability).
- Beneficiaries of a deceased member of a retirement fund who was not paid the full benefit that was due to them.





# Unclaimed Benefits Query Process

## The role of the FSCA in the process

- FSB or the FSCA does not administer the payment of unclaimed or surplus benefits.
- Made available the unclaimed benefits search engine facility on the FSCA's website collates unclaimed benefit data obtained from retirement funds and administrators which may be accessed in various ways by members of the public to ascertain whether there are any unclaimed benefits due to them
- The FSCA plays a coordination role between enquirers and retirement funds and/or retirement fund administrators by ensuring that the unclaimed benefits queries received from prospective members and beneficiaries of retirement funds are submitted to the relevant funds and that the responses to the queries are sent out to enquirers. The FSCA service is free!
- The FSCA uses various methods to assist the members or beneficiaries in this regard, namely:
  - Online search engine
  - **FSCA unclaimed benefits website portal**
  - Community outreach programmes
  - Walk-in clients at our offices
  - SMS line
  - Receiving enquiries via email, post
  - More information on the above can be accessed at <https://www.fsca.co.za/Customers/Pages/Unclaimed-Benefits.aspx>
  - FSCA is neither the custodian of unclaimed or unpaid benefits held in retirement funds nor is it the primary custodian of the information relating to the members of retirement funds

## What must you do to access your unclaimed benefit?

- First contact the pension fund you belonged to. Alternatively, call the Financial Sector Conduct Authority's Call Centre on 0800 20 3722, and you will be provided with the contact details of the pension or provident fund to enable you to claim your unclaimed pension fund benefit.
- You could also visit the FSCA website at [www.fsca.co.za](http://www.fsca.co.za) and do a search by yourself for unclaimed benefits that may be due to you or someone else.



# FSCA Retirement Fund Enquiry Form



Financial Sector  
Conduct Authority

Block B, 41 Matroosberg Road  
Aediles Gardens  
Pretoria  
South Africa  
0081

P.O. Box 95865, Menlo Park, Pretoria, 0081  
Tel: 012 428 8000 Fax: 012 348 5915  
Website: [www.fscsa.co.za](http://www.fscsa.co.za) Email: [Consumer.Guest@fscsa.co.za](mailto:Consumer.Guest@fscsa.co.za)

## RETIREMENT FUND ENQUIRY FORM

Case or Query number

Private fund	
Government Employees Pension Fund (GEPF)	
Mining Industry	

### PART A ENQUIRER'S DETAILS (to be completed by the person making the enquiry)

Enquirer Surname	
Enquirer Full Name/s	
Relationship with member	

### PART B MEMBER'S DETAILS

Member Surname	
Member Full Name/s	
Identity (ID) Number	
Old ID Number	

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Member Alive / Deceased	
Date of Death	

### PART C CONTACT DETAILS (member or enquirer)

Postal Address	
Postal code	
Phone Number	
Mobile number	
E-mail	

### PART D FUND AND EMPLOYER'S DETAILS (Private AND GEPF)

Name of the Fund	
Fund Administrator	
Name of the Company	
Date of joining the Company	
Date of leaving the Company	

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### PART E FUND AND EMPLOYER'S DETAILS (Mining only)

Name of Employer(s)	
Date of Joining the Company	
Date of Leaving the Company	
Industry number	

### PART F DETAILS OF COMPLAINT (What is the enquiry about?)


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### PART G SUPPORTING DOCUMENTS (Please Indicate (X) the supporting documents that have been attached, only provide a copy not the original document)

Member documents	
South African ID or passport	
Death certificate	
Payslip	
Benefit statement issued by the fund	
Any previous correspondence with the fund	
Record of service (important in respect of mining enquiry)	
Makhulu skop (Clock card issued to members in the mining industry)	
Beneficiary or enquirer documents	
South African ID or passport	
Marriage certificate	

#### NBI BY LODGING THIS ENQUIRY YOU AGREE TO THE FOLLOWING:

- You wish the Authority to submit an enquiry to the fund on your behalf
- The Authority will at all times respect your privacy and keep your personal information confidential
- The Authority endeavours, as far as it is under its control, to ensure compliance with the provisions of the Protection of Personal Information Act (POPI) when dealing with your personal information
- The information submitted by you to the Authority will be used solely for the purposes of lodging such an enquiry on your behalf
- Should your enquiry not fall within the jurisdiction of this office's mandate, you give consent to the Authority to forward any information submitted by you to another entity with the appropriate jurisdiction;
- Where your enquiry falls under the Authority's jurisdiction, you give consent that the Authority may share any information submitted by you with any of the relevant parties involved in the enquiry to find out important information about your case. This consent will also include details of minor children (where applicable) i.e. birth certificates of minors or any similar document, where they are beneficiaries with regards to death benefit claims;
- You have the right to object to the sharing of your personal information with other parties. Should this be the case, then the Authority will not be able to conduct an enquiry on your behalf and your file will be closed. By submitting an enquiry you confirm that you do not object to the sharing of personal information with other parties.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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# Required Documentation

## Documents required by the FSCA

- Completed enquiry form.
- Copy of the member's ID/death certificate.
- Copy of the beneficiaries' ID.
- Copy of payslip, benefit statement or any document which may serve as proof that the individual was a member of the fund.
- Any previous correspondence with the fund.
- Record of service (important in respect of mining enquiry).
- Makhulu Skop (Clock card issued to members in the mining industry).

## Beneficiary or enquirer documents

- South African ID or passport.
- Marriage certificate.



# FSCA Unclaimed Benefit Online Portal

## COMPLAINTS / ENQUIRIES / COMPLIMENTS

Is this a new complaint/enquiry/compliment or a follow-up on an existing complaint/enquiry/compliment?

- New  
 Follow-up

Validate Input

All Personal Information is processed in line with the FSCA's Privacy Policy which can be found on [Privacy Policy](#)

## COMPLAINTS / ENQUIRIES / COMPLIMENTS

Kindly provide the Pension Fund and/or the Employer Details related to the Unclaimed Benefits Query!

Is this a new complaint/enquiry/compliment or a follow-up on an existing complaint/enquiry/compliment?	<input checked="" type="radio"/> New <input type="radio"/> Follow-up
Please select the applicable option	<input type="radio"/> Complaint against the FSCA (complete Section D) <input type="radio"/> Complaint against a person or entity regulated by the FSCA or unregistered business (complete Section E) <input type="radio"/> Compliment (complete Section F) <input type="radio"/> Enquiry, request information or feedback from the FSCA (complete Section G) <input type="radio"/> Media Enquiry (complete Section H) <input checked="" type="radio"/> Unclaimed Benefits Query (complete Section G)
Did you use the Unclaimed Benefit Search function on the FSCA Website?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Kindly provide the Pension Fund and/or the Employer Details related to the Unclaimed Benefits Query:	<input type="text" value="Please Select Pension Fund"/>
Are you submitting on behalf of?	<input checked="" type="radio"/> Self (complete Section A) <input type="radio"/> Another Individual (complete Section A and Section B)
Preferred Method of Communication for feedback	<input checked="" type="radio"/> Email <input type="radio"/> Postal Service / Printed Letter
Department(FSCA) to which your complaint/query relates to	<input type="text" value="RETIREMENT FUNDS"/>



# FSCA Unclaimed Benefit Online Portal

## A. YOUR DETAILS

Fields marked with \* are compulsory.

User Title *	<input type="text" value="Please Select A Title"/>				
User Name *	<input type="text"/>				
User Surname *	<input type="text"/>				
User Email Address *	<input type="text"/>		Reference Number of this call will be sent to this email address		
User Identity Type: ID / Passport Number	<input type="text" value="Please Select An Identity Type"/>				
User Cell Phone No.	<input type="text"/>	<input type="text"/>	<input type="text"/> e.g. +27 82 5566200 (Country code / Area code / Number)		
User Telephone No.	<input type="text"/>	<input type="text"/>	<input type="text"/> e.g. +27 12 4288000 (Country code / Area code / Number)		
User Physical Address	<input type="text"/>	SUBURB	User Postal Address	<input type="text"/>	SUBURB
	<input type="text"/>			CITY	
	<input type="text"/>	COUNTRY		<input type="text"/>	COUNTRY
	<input type="checkbox"/> Postal Address same as Physical Address?			<input type="checkbox"/>	

## B. OTHER INDIVIDUAL'S DETAIL

Fields marked with \* are compulsory.

Title *	<input type="text" value="Please Select A Title"/>				
Name *	<input type="text"/>				
Surname *	<input type="text"/>				
Email Address *	<input type="text"/>				
Identity Type: ID / Passport Number	<input type="text" value="Please Select An Identity Type"/>				
Cell Phone No.	<input type="text"/>	<input type="text"/>	<input type="text"/> e.g. +27 82 5566200 (Country code / Area code / Number)		
Telephone No.	<input type="text"/>	<input type="text"/>	<input type="text"/> e.g. +27 12 4288000 (Country code / Area code / Number)		
Physical Address	<input type="text"/>	SUBURB	Postal Address	<input type="text"/>	SUBURB
	<input type="text"/>			CITY	
	<input type="text"/>	COUNTRY		<input type="text"/>	COUNTRY
	<input type="checkbox"/> Postal Address same as Physical Address?			<input type="checkbox"/>	
Relationship to this Individual *	<input type="text" value="Please Select A Relationship"/>				





# FSCA Unclaimed Benefit Online Portal

## G. REQUEST FOR INFORMATION

Details of information required *	<div style="border: 1px solid black; height: 150px;"></div> <p style="text-align: right; font-size: small;">2000 characters remaining</p>
Reason the information is required *	<div style="border: 1px solid black; height: 150px;"></div> <p style="text-align: right; font-size: small;">2000 characters remaining</p>

### DISCLAIMER

BY LODGING THIS COMPLAINT/ENQUIRY YOU AGREE TO THE FOLLOWING:

1. The Authority will at all times respect your privacy and keep your personal information confidential;
2. The Authority endeavors, as far as it is under its control, to ensure compliance with the provisions of the Protection of Personal Information Act (POPI) when dealing with your personal information;
3. The information submitted by you to the Authority will be used solely for the purposes of investigating such a complaint / enquiry on your behalf;
4. Should your complaint/enquiry not fall within the jurisdiction of the Authority's mandate, you give consent to the Authority to forward any information submitted by you to another entity with the appropriate jurisdiction. In this instance, the Authority will provide you with the details of this entity;
5. Where your complaint/enquiry falls under the Authority's jurisdiction, you give consent that the Authority may share any information submitted by you with any of the relevant parties involved in the complaint / enquiry to resolve your complaint / enquiry. This consent will also include details of minor children (where applicable) i.e. birth certificates of minors or any similar document, where such complaint / enquiry relates to the minor children;
6. You have the right to object to the sharing of your personal information with other parties. Should this be the case, then the Authority will not be able to conduct a complaint/enquiry on your behalf. By submitting a complaint/enquiry you confirm that you do not object to the sharing of personal information with other parties.

Agree  Disagree

Kindly provide the Pension Fund and/or the Employer Details related to the Unclaimed Benefits Query!

To ensure that this complaint/enquiry is submitted by a person (not a robot), please provide the answer to the following question: 5 + 10

Validate Input

# FSCA unclaimed benefits query process

## What happens when the forms have been received and captured by the FSCA?

- The forms are captured and forwarded to the relevant fund administrators.
- The members or beneficiaries will receive an acknowledgement letter through email or post.
- The letter will reflect the details of the capturer, ref no, and the six months turnaround time.
- The administrator will respond with the outcome of its search (No records found, Benefit Paid, Benefit Due)
- The outcome will be communicated with the enquirer by FSCA.



**END – Thank you**

