

ZIMBABWE

APPLICATIONS TO BE COMPLETED, IN DUPLICATE, BY PERSONS INTENDING TO EMIGRATE
FROM ZIMBABWE

I, Mr./Mrs./Miss
(Full Name in Block Letters. If applicant is a woman who is widowed or divorced this fact should be stated)

of
(Address in Zimbabwe)

hereby apply for permission to have assets to the value of \$ transferred to me in
..... and I declare that :
(Name of Country)

I am leaving / left Zimbabwe to take up permanent residence in :

..... on 20
(Name of Country)

I was born on and have been resident in Zimbabwe since

I will be / was accompanied by the following dependants :

NAME	DATE OF BIRTH
.....	
.....	
.....	
.....	
.....	
.....	
.....	

All my assets and commitments have been declared and the assets in Zimbabwe have been placed under

the control of
(Name of Bankers)

Signature(s) of applicant(s) and accompanying dependants other than
Minors. (If the applicant is a minor travelling alone, the form should be
Signed by him and countersigned by parent or guardian)

.....
.....
.....

Date

If the applicant is married and his/her husband/wife is not accompanying him/her, his/her full name and address and intentions
regarding future permanent residence should be stated.

.....

If the applicant is a minor his/her age and intentions regarding future permanent residence of any living parents should be stated.

.....

TO BE COMPLETED BY BANK LODGING APPLICATION

We certify that all assets declared by the applicant(s) as having been placed under our control have been so placed and:-

*(a) that the applicant has not yet left Zimbabwe; that we have examined his/her passport and those of any accompanying
dependants, and have verified that the personal details shown on this form are correct;

OR

(b) that the applicant has already left Zimbabwe and foreign exchange to the value of \$
was sold to the applicant(s) prior to departure;

(c) that the amount shown under (b) is excluded from the total cash assets shown under Section 1 of the STATEMENT OF
ASSETS AND COMMITMENTS.

Holiday allowances availed of by emigrants and dependants during preceding 9 months.

NAME	AMOUNT(S)	DATE(S)

Stamp of Bank Lodging Application

STATEMENT OF ASSETS AND COMMITMENTS AS AT DATE OF APPLICATION

All sections must be completed. If any section is inapplicable the word "NIL" should be shown in the appropriate space.

Details of any third party interests in any assets must be specified.

1. CASH BALANCES IN ZIMBABWE

Currency Notes and Coin \$

Current Accounts

Name of Bank	Name of Account Holder	
.....		\$
.....		\$
.....		\$
.....		\$
.....		\$

Savings Accounts

Name of Bank, Building Society, or other Deposit Receiving Institution	Name of Account Holder and Number of Account	
.....		\$
.....		\$
.....		\$
.....		\$
.....		\$

State whether any of the above accounts are to be retained and how it is Intended to deal with the funds

.....

.....

.....

.....

.....

Anticipated Receipts prior to emigration
(e.g. Salary, STATING SOURCE, proceeds of sale of property, furniture, etc)

.....	\$
.....	\$
.....	\$
.....	\$
.....	\$

TOTAL \$

LESS

Anticipated Expenses in Zimbabwe payable before emigration
(e.g. Income Tax, living expenses, fares etc.)

.....	\$
.....	\$
.....	\$
.....	\$

Sub-Total \$

Net Cash available for transfer on departure \$

Commitments in Zimbabwe payable after emigration (e.g. Insurance premiums, mortgage repayments, rates, etc.)

..... \$

..... \$

..... \$

..... \$

Assets situated outside Zimbabwe (Full Details)

Description	Source and Date Acquired	Value

Assets transferred to Zimbabwe from External Sources

Description	Manner which Assets Transferred (i.e. indicate whether transfer was arranged through a commercial bank in Zimbabwe or through the medium of the Zimbabwe Stock Exchange)

2. SECURITIES

(a) External Securities *

No.	Description	Date Acquired	Registered in the Name of	Agents by whom held	Income Paid to	Total Market Value

(b) Local Quoted Securities

No.	Description	Date Acquired	Registered in the Name of	Agents by whom held	Income Paid to	Total Market Value

(c) Local Unquoted Shares

No.	Description	Date Acquired	Registered in the Name of	Agents by whom held	Income Paid to	Total Market Value

*Where the applicant holds external shares in his own name, which were acquired after the 23rd February, 1961, full details of the source of the funds used to purchase the shares must be given.

Note:- If there is insufficient space above a separate schedule in respect of each section should be attached furnishing the details required.

3. ASSURANCE POLICIES

Name of Company	1.	2.	3.
Number, Amount and Date of Contract			
Payable to			
Total Premium Paid to Date			
Maturity Date			
State Reserve Value \$			

Reserve Certificates must be furnished to confirm the above details.

4. ANNUITIES

Name of Company	1.	2.	3.
Number, Amount and Date of Contract			
Payable to			
Premiums Payable (State whether monthly, quarterly or annually)			
Total Premium Paid to Date			
Maturity Date			

5. REAL ESTATE

Brief Description

Owner's Name

Name & Address of Agent who will manage property.....

.....

Title Deeds held by

Approximate value \$

Amount of Bond (if any) \$

6. OTHER ASSETS (Full Details)

.....

.....

.....

.....

7. INCOME WHICH WILL CONTINUE TO ACCRUE IN ZIMBABWE AFTER EMIGRATION (e.g. * Pension, Rents, Fees, etc.)

Description	Source

- State whether Pension is derived from an employer or a retirement annuity approved in terms of the Pension and Provident Funds Act 1976; if not please give details.

HOUSEHOLD EFFECTS AND PERSONAL BELONGINGS TO BE TAKEN OR SENT ABROAD

(a) Household effects \$

(b) Jewellery \$

(c) Other personal belongings \$

(d) Other \$

TOTAL \$

8. MOTOR VEHICLES, CARAVANS, TRAILERS, BOATS, etc, TO BE EXPORTED

Type of Vehicle	Date of Purchase	Year of Manufacture	Present Value
			\$
			\$
			\$
			\$

PENSION REMITTANCE CERTIFICATE

SECTION ONE – MUST BE COMPLETED

NAME OF FUND

FUND REGISTRATION NUMBER

TYPE OF FUND (DELETE INAPPLICABLE)

RETIREMENT ANNUITY/CONTRIBUTORY PENSION/NON-CONTRIBUTORY PENSION/ PROVIDENT

FULL NAMES OF PERSON RETIRING

DATE OF BIRTH DATE OF RETIREMENT AGE AT RETIREMENT DATE JOINED FUND

SECTION TWO – CONTRIBUTORY PENSIONS FUNDS

1. Annual amount of pension \$ 2. Portion of pension commuted %

3. Commutation factor x 4. Amount of commutation \$

5. Residual pension \$ Per annum

6. Is the pension subject to automatic annual increases YES / NO (delete inapplicable)

7. If retiring before age 60 state :-

(i) Reason for retiring
(a medical certificate is required if retiring on grounds of ill-health)

(ii) Provision in rules of fund allowing for early retirement and date introduced

I,, being the Principal Officer of the fund certify that the abovementioned particulars are true and correct.

.....
SIGNATURE (Principal Officer of Fund)

SECTION THREE – NON-CONTRIBUTORY PENSIONS FUNDS

1. Annual amount of pension \$ 2. Portion of pension commuted %

3. Commutation factor x 4. Amount of commutation \$

5. Residual pension \$ Per annum

6. Is the pension subject to automatic annual increases YES / NO (delete inapplicable)

7. If any portion of the commutation referred to in 4 above is attributable to increased contributions made in terms of the Rules

a) were such rules introduced before 3rd March 1978 YES / NO

b) If the answer to the above is NO what amount of the commutation is attributable to such increased contribution \$.....

8. If retiring before age 60 state :-

(i) Reason for retiring
(a medical certificate is required if retiring on grounds of ill-health)

(iii) Provision in rules of fund allowing for early retirement and date introduced

I,, being the Principal Officer of the fund certify that the abovementioned particulars are true and correct.

.....
SIGNATURE (Principal Officer of Fund)

SECTIONS FOUR AND FIVE – PROVIDENT FUNDS AND RETIREMENT ANNUITY FUNDS OVERLEAF

SECTION FOUR – PROVIDENT FUNDS

1. The rules of the Fund allow for a member to utilise the capital sum accruing to him on retirement to purchase a pension with an insurer.
2. The capital sum on retirement was \$ and was paid to (name of insurer)
On (date)

I,, being the Principal Officer of the fund certify that the abovementioned particulars and those contained in Section One of this form are true and correct.

.....
SIGNATURE (Principal Officer of Fund)

TO BE COMPLETED BY INSURER REFERRED TO ABOVE

- | | |
|---|--|
| 1. Name of insurer | 2. Annual amount of pension \$ |
| 3. Proportion of pension commuted % | 4. Commutation factor x |
| 5. Amount of commutation \$ | 6. Residual pension \$ per annum |

I,, being the Principal Officer of the insurer certify that the abovementioned particulars are true and correct.

.....
SIGNATURE (Principal Officer of Fund)

SECTION FIVE – RETIREMENT ANNUITY FUNDS

- | | |
|---|---|
| 1 (a) Annual amount of pension \$ | (b) Portion of pension commuted % |
| (c) Commutation factor x | Amount of commutation \$ |
| (d) Is any portion of the commutation attributable to contributions made after 3 rd March 1978 | YES / NO |
| If so, state amount \$ | |
| (e) Residual pension \$ Per annum | |
2. If moneys are to be transferred to another retirement annuity fund, state :-
- | | |
|--|----------|
| (a) Name of Fund | |
| (b) Amount of money transferred | |
| (c) Is any of the amount referred to in 2(b) attributable to contributions made after 3 rd March 1978 | YES / NO |
| If so, state amount \$ | |

I,, being the Principal Officer of the Fund certify that the abovementioned particulars and those contained in Section One of this form are true and correct.

.....
SIGNATURE (Principal Officer of Fund)

TO BE COMPLETED BY FUND / ASSURER WHO HAS RECEIVED MONEY FROM A FUND IN TERMS OF SECTION FIVE (2)

- | | |
|--|--------------------------------------|
| 3. Name of Fund | |
| 4. Amount Received \$ | 5. Annual amount of pension \$ |
| 6. Proportion of pension commuted % | 7. Commutation factor x |
| 8. Amount of commutation \$ | |
| 9. Is any of the commutation referred to based on the amount of contributions reflected in Section Five 2(c) YES / NO | |
| 10. If the answer to 9 is in the affirmative, state the amount \$ | |
| 11. Residual Pension \$ Per annum | |

I,, being the Principal Officer of the Fund certify that the abovementioned particulars are true and correct.

.....
SIGNATURE (Principal Officer of Fund)