



INACTIVE ACCOUNT WITHDRAWAL



NSL members who can provide evidence of inactive accounts can use this form to request from the available options below.

Type of payment

NB
 UB
 Transfer
 Merge
 Death

Member details and address

Given names
 Surname
 Gender Male Female Mr Ms Miss Mrs
 Name of employer
 Employer address
 Residential address
 Mailing address
 Preferred email
 Working province

Date of birth
 Super #
 Payroll #
 Phone #

Requirements

Inactive Account withdrawal form
 Statutory declaration stating employment status & bank account details
 Proof of valid ID (refer to page 3 of SAF)
 Bank Statement (at least 3 months)

Account name
 Account number
 Bank name
 Branch name

Note: In addition to the above, the below requirements are necessary depending on the type of claim

Death
 Death certificate
 Inactive Account Withdrawal Form
 Proof of valid ID (refer to page 3 of SAF)
 Statutory declaration stating relationship to member and bank account details
 Bank Statement (at least 3 months)

Merge
 Current employer name
 Payroll number
 Date employed
 Date terminated (if applicable)

Previous employment details
 Employer name
 Payroll number
 Date employed
 Date terminated

Member / beneficiary declaration

I certify that all the above information written by me is true and correct. I agree for NSL to send me updates on my mobile phone.

Signature

Date

NSL office use only

I, have witnessed that the said form was duly signed in my presence by the member.

Comments

Position

Signature

Date

