CIVIL SERVICE FAMILY PROTECTION SCHEME

FORM A7

LIFE CERTIFICATE

PENSION NO: .................

To:

The General Manager,
Civil Service Family Protection Scheme Board, Post Code 11327
2nd Floor Mutual Aid Building
5, Guy Rozemont Square, Port Louis
-- Tel: 2121781, 2101032, 2103503. Fax: 2125984
Email: csfsmru@intnet.mu Website: http://csfpsb.govmu.org

I, ............................................................................. hereby certify that

to the best of my knowledge and belief Mr/Mrs. .................................................................

(NIC No. ..........................................................the widow/widower of the late

.............................................................................. is on this .............................. day of

................................................................. 20.......still in Mauritius, alive and not remarried.

MINORS (if applicable)

I further declare that to the best of my knowledge and belief :-

(1) ..........................................................(2) ...................................................

(2) ..........................................................(4) ...................................................

the orphan(s) of Mr and Mrs ........................................... is/are, on

this ............................................. day of ............................... 20....

still in Mauritius, alive, unmarried under 18/21 years * of age and under the

care of ..................................................

* (under 21 applies to a child receiving full time education).

Title : ........................................ Signature : ........................................

NIC Number : ................................................
Being still in Mauritius and not remarried, I hereby claim payment of my pension

Signature or Thumbprint of pensioner: ............................................................

Date: .................................  Tel No. .......................................................

Address .................................................................

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

__________________________________________________________________

--Life Certificates should be collected from this office.
--To be certified after 1st January and submitted before 15th February

This form must be signed by such pensioners receiving pension through the Civil Service Family Protection Scheme Board and forwarded once yearly (in February) to this office, addressed to the General Manager. The declaration must be signed by any of the following persons:

Judges Supreme Court  Medical Practitioners
Members of National Assembly  Barristers, Notaries and Attorneys
Heads/Deputy Heads of Ministries/Departments  Police Sergeants and above
Ministers of Religion  Municipal Councillors and Members of District Council
Members of Village Councils  Districts Clerks

__________________________________________________________________