



## FURNITURE BARGAINING COUNCIL

Room 1101 ♦ 11<sup>th</sup> Floor ♦ Arcadia Centre ♦ 376 Steve Biko Street ♦ Arcadia ♦ Pretoria  
Correspondence to be addressed to: THE REGIONAL MANAGER ♦ Post Office Box 57086 ♦ Arcadia ♦ 0007  
Telephone (012) 323-2700 ♦ Facsimile (012) 323-9841 ♦ e-mail pretoria@furnbed.co.za ♦ Website www.furnbed.co.za

### APPLICATION FOR PAYMENT OF HOLIDAY BONUS FUND MONEYS AND LEAVE PAY FUND MONEYS

\_\_\_\_\_ Date

I hereby wish to apply for payment of my Holiday Bonus Fund moneys and Leave Pay Fund moneys and therefore submit the following particulars:

1. Surname (Capitals) \_\_\_\_\_
2. First Name/s \_\_\_\_\_
3. Identity Number 

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4. Name of last employer in the Furniture, Bedding and Upholstery Manufacturing Industry  
\_\_\_\_\_
5. Date left \_\_\_\_\_ 5.1 Period of service \_\_\_\_\_

#### REASONS FOR LEAVING

RETRENCHED       RESIGNED       CLOSURE       DISMISSED

**NB:** *If retrenched or establishment closed, letter to be submitted.*

6. Address to which the cheque must be posted and/or date to be collected  
\_\_\_\_\_
7. I declare that the above particulars are true and correct.

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Council's Signature

8. Copy of identity document to be attached.
9. Industry number \_\_\_\_\_

#### FOR OFFICE USE ONLY

Original cheque number \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_

Replacement cheque number \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_

\_\_\_\_\_  
Received

\_\_\_\_\_  
Identified by