

APPLICATION BY MEMBER TO CORRECT/CHANGE PARTICULARS ON FNPf RECORD

Attach **original or certified** copy of Birth Certificate or Marriage Certificate together with any other form of ID (certified Passport / Driving License / Citizenship / Tax Identification Number)

1. Member's Full Name

2. Father's Name (or mother's name where applicable)

3. Date of Birth

4. Gender

 M F

5. Place of Birth

6. Postal Address

 Phone Contact:

7. Occupation

8. Employment No (TPF No, Regimental No, etc)

9. Email Address

10. Member Number

11. Date of Marriage (if Married)

12. Next of Kin (Name)

13. Address (Next of Kin)

14. Phone Contact

I declare that the information provided in this form is true and correct to my knowledge.

Member's Left Thumb Print

Stamp Commissioner
of Oaths/JP/DO

MEMBER'S PHOTOGRAPH

Attach 1 recent Passport
Size Photograph duly
certified by Commissioner of
Oaths, Justice of the Peace.
District Officer

Member's Signature

Signature of Witness

Full Name of Witness

Designation / Title & Address of Witness

Date

(Commissioner of Oaths/Justice of the Peace/District Officer or FNPf Officer)

Use Black or Blue Ink to Fill This form and Write Clearly in Block Letters (ALL PARTS MUST BE COMPLETED)

7A

Part 1 - 3 - to be completed by member

1. Request for change of which Particulars (to be completed by member)

- Name Father's Name
 Date of Birth Signature

2. Documental Evidence (to be completed by member - state number and date issued)

Birth Certificate: _____

Marriage Certificate: _____

Decree Nisi or Others: _____

3. Please pay \$3 for a duplicate FNPF card at any FNPF Office and attach receipt

Warning: It is an offence, if any person, for any purpose connected with the FNPF Act:-

- (i) **Knowingly makes any false statement; or**
- (ii) **produces or furnishes or causes or knowingly allows to be produced or furnished any document which he/she knows to be false in material particular.**

4. STATEMENT FROM EMPLOYER

A. Employer's Reference Number: _____ Employee's Employment ID Number _____

Employer's Name: _____

Employer's Address: _____

B. I/We Hereby Certify that _____ F/N _____

(name of employee) bearing the membership number of _____ is currently employed by

(Name of employer)

C. That the above employee has been in our employment for a period of _____
months/years

D. That the information provided by the employee is true and correct

Dated at _____ this _____ day of _____ 20 _____

Signed : _____

Full Name : _____

Designation : _____

Company
Stamp

5. DECLARATION BY MEMBER

I, _____ of _____

solemnly and sincerely declare as follows :

i) Name of employer who registered you _____

ii) Employment history (please indicate employer's names & dates of employment) _____

iii) Reason (s) for change (please indicate the need for change)

Declared at _____
this _____ day of _____
_____ 20 _____

before me and I certify that the declaration was read over in
the _____
language to the declarant who appeared to have fully
understood the meaning thereof.

Signature (witness)

} _____
Member's Signature

**This Declaration must be witnessed by a Commissioner for Oaths,
Justice of the Peace or District Officer.
The Official stamp of the office holder must be shown.**

FOR OFFICE USE ONLY

6. To be completed by Fiji National Provident Fund

1. Member's details as on current record

Name: _____

Fathers Name: _____

Members FNPF No _____ Date of Birth _____

1. Photo ID match : Yes / No

2. Employment History confirmed : Yes / No

3. Relevant documents are attached : Yes / No

4. Recommended for approval : Yes / No

If No, (a) Action taken :

(b) B/U :

Evidence for Change Sighted:

Birth Certificate; Marriage Certificate; Decree Nisi; Deed Poll,

Details as per

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Processing Officer

Name

Signature Date

Signature Date

Team Leader: Vetted

Name

Signature Date

7 Scanned

Signature Date

Approving Officer : Approved / Rejected

Name

Signature Date

Letter / Card Sent to Member

Signature Date

Amendments Logged

Name

Signature Date

Letter Sent to Employer

Signature Date

7 Filed in Binder

Signature Date

INSTRUCTIONS

THIS FORM MUST BE COMPLETED WHENEVER A CHANGE OR CORRECTION IN THE EXISTING FUND RECORDS IS REQUIRED, SUCH AS SIGNATURE, DATE OF BIRTH, NAME, ETC.

1. Signature Change

If you wish to change your signature on FNPF records and all other information is same as that on your Birth Certificate or Marriage Certificate, you should complete all Sections
Marriage Certificate or Birth Certificate must be attached.

2. Change / Correction of Name

You should complete all Sections

- (a) Marriage Ground - attach both Marriage Certificate & Birth Certificate
- (b) Divorce - attach Decree Nisi
- (c) Deed Poll - attach Deed Poll copy

3. Change/Correction/Recording of Father's Name or Mother's Name

If you need to correct or update information regarding your father's name or mother's name, please complete all parts.
Birth Certificate and Marriage Certificate must be attached.

4. Change/Correction of Date of Birth

All the Sections must be properly completed. Marriage Certificate and Birth Certificate must be attached. Other documentary evidence such as Passport and Driver's Licence may be required in some instances.

5. Note

Please enter MOTHER'S NAME where Birth Certificate does not show FATHER'S NAME

* All documents to be witnessed by Commissioner of Oaths, Justice of Peace or District Officer

All Correspondence to be addressed to the General Manager & Chief Executive

Head Office

Provident Plaza 2
Private Mail Bag
Suva
Telephone: (679) 330 7811
Facsimile: (679) 330 7611

Lautoka

Drasa Avenue
Private Mail Bag
Lautoka
Telephone: (679) 666 1888
Facsimile: (679) 666 5232

Labasa

Rosawa Street
Private Mail Bag
Labasa
Telephone: (679) 881 2111
Facsimile: (679) 881 2741

Valelevu Agency

Valelevu Complex Building
Saqa Place
Valelevu
Telephone: (679) 3343 671
Facsimile: (679) 3343 670

Nadi Agency

Shop 2 Lalidhar Arcade
Namaka Lane
Nadi
Telephone: (679) 672 8981
Facsimile: (679) 672 8982

Savusavu Agency

Budget Lodge Building Ltd
Main Street
Savusavu
Telephone: (679) 885 3396
Facsimile: (679) 885 3397

Ba Agency

Ganga Singh Street, Ba
Telephone: (679) 667 0003

Email: information@fnpf.com.fj Website: www.myfnpf.com.fj

