



Jan – Dec '12

Dear Client,

Thank you for choosing Life's Miracle UIF Services cc to assist you with your maternity claim. We look forward to assisting you!

Kindly complete the following **registration and agreement form** and fax or scan and e-mail back to us together with your **proof of R300-00 deposit**.

A reference number will be allocated to you and your **UIF application forms** will be sent to you within 24 hours after being received by our offices.

REGISTRATION:

1. **Surname:** _____
2. **Full Names:** _____
3. **Postal Address:** _____
4. **Expected due date of baby:** _____
5. **Cellular number:** _____
6. **E-mail address/fax nr:** _____
(your UIF forms will be sent to this address)
7. **Where did you find out about our service? Please specify:**
 - Magazine: _____
 - Internet search: _____
 - Baby Show: _____
 - Doctors room: _____
 - Employer: _____
 - Used us previously: _____ **R50 off**
 - Referral/other: _____

AGREEMENT FORM

I, the undersigned

Name and Surname: _____

ID Nr : _____

do hereby appoint

Life's Miracle UIF Services cc: (Registration Nr: 2005/090238/23)

Address: 57 Klaserie Crescent, The Meadows, Moreleta Park, **Pretoria**, 0044

to be my lawful agent for managing and transacting my claim for maternity benefits in terms of Section 25 of the Unemployment Insurance Act 63 of 2001, in the Republic of South Africa with full powers of authority and in my name and for my account and benefit.

I understand that it is my responsibility to ensure that the information provided on the necessary UIF application forms is **true and correct**.

I undertake to **follow the instructions** provided by *Life's Miracle UIF Services cc* in the information pack to ensure that my forms are correctly completed.

Life's Miracle UIF Services cc will **not be held responsible** for any payments, or non-payments, by the UIF as a result of false or insufficient information supplied by you, or any other reason.

I understand that it is my responsibility to inform Life's Miracle UIF Services cc in writing (email / fax) if I decide to return back to work, earlier than my expected date (as initially indicated on my UI2.7 form). The notification should be in advance and should stipulate the exact dd/mm/yy on which you will resume duty again.

Life's Miracle UIF Services will not be held responsible for any overpayment resulting from a previous claim by the UIF, as a result of false or insufficient information supplied by you, or any other reason.

I understand that *Life's Miracle UIF Services cc* can **only submit the UIF application** forms and **cannot sign any legal documents on my behalf**.

Life's Miracle UIF Services cc will **not accept a new UIF application** if baby is **5 months or older**.

Life's Miracle UIF Services cc has no legal agreement or affiliation with the **Department of Labour** regarding any UIF claim for maternity benefits, and therefore **cannot be held liable** for any damages as a result of any actions taken, or decisions made by the Department of Labour regarding our service or your claim.

Signature of applicant
(this page is submitted to UIF)

Date

SERVICE AND FEES:

THE FOLLOWING SERVICE WILL BE PROVIDED TO YOU:

- Supply you with all the necessary UIF application forms via e-mail or fax as well as a step by step information document for the correct completion of your forms
- On commencement of your maternity leave we will submit the necessary UIF application forms to the Department of Labour
- We will follow up on your claim and notify you once it has been approved by the Department of Labour
- On approval of your claim we will submit your monthly forms to the Department of Labour for the duration of your maternity leave (to a maximum period of four (4) months)

SERVICE FEE:

- **Normal Fee: R550** once off fee **OR** payable in two options: **R300** registration fee + **R250** balance when forms get submitted to us.
- **2nd/3rd Clients: R500** once off fee **OR** payable in two options: **R300** registration fee + **R200** balance when forms get submitted to us
- to thank our loyal mom's you will receive a **R50** discount if you make use of our services for the second or third time!
- **Courier Fees (optional): R90/R140** (depending on your area) - should you not be able to hand deliver your forms (you are also welcome to register mail your forms)

The abovementioned fees are all inclusive and NOT transferable or refundable, for whatever reason, however, *Life's Miracle UIF Services cc* may use their discretion in such cases. Their decision regarding these refunds is final, and they will not enter into any correspondence what so ever regarding this matter.

BANKING DETAILS:

- **Life's Miracle UIF Services cc Banking Details:**

Standard Bank

Castle Walk-branch

Branch code: 01 46 45

Account nr: 062 504 096

Current account

Please use your name & surname as reference

Please fax your proof of payment to: **012 997 2540** **OR**

email: info@lifesmiracleuif.co.za

Thus done and signed at _____ on this the ____ day
of _____ 200__

Signature

EMPLOYMENT CHECKLIST:

Name & Surname: _____

Please provide us with your employment history for the last four years: (i.e. 2008-2012)

EMPLOYER

PERIOD OF SERVICE

Please read the following section carefully to check if you do qualify for

UIF: (please *do not pay your deposit* to us if any of the following is applicable)

You Cannot Claim UIF Maternity Benefits IF:

1. Your baby is older than 6 months.
2. If you do not have a bar coded ID.
3. If you have not been contributing to the UIF fund, in other words, earning a commission based salary.
4. If you are the sole owner of your company.
5. If you receive 100% of your salary whilst on maternity leave.
6. If you claimed normal UIF (retrenchment) benefits in the last 4 years.
7. If you were 'Constructively dismissed'.