



REPUBLIC OF SOUTH AFRICA

**APPLICATION FOR ALLOWANCE OR INTEREST  
(Person under Disability)**

A. PARTICULARS OF APPLICANT:													
Full names & Surname:													
ID number:													
Residential address:													
Postal address:													
Tel number (Work):	Code	Number											
Tel number (Home):	Code	Number											
Fax number (if any):	Code	Number											
Cell number:													
E-mail address:													

I, ..... hereby apply for an allowance / maintenance or interest to be paid to me on behalf of the under mentioned person(s) who is under my care / receive financial support from me. The allowance is required for the following purposes:  
 .....

I am unable to provide these requirements without financial support.

\* I receive no financial grant towards his/her maintenance.

\* I receive the following grant / maintenance / contribution to support the under mentioned person.

R ..... / .....

.....  
 SIGNATURE UNDER DISABILITY

.....  
 DATE

.....  
 RELATIONSHIP TO PERSON UNDER DISABILITY

*\* Delete what is not applicable*

<b>B. PARTICULARS OF PERSON UNDER DISABILITY</b>													
Full Names and Surname:													
ID number or Date of Birth:													
Estate reference number (If available):													
GF File (if available):													

<b>C. CERTIFICATE OF MAINTENANCE</b>	
<p>I ..... the undersigned, certify that the aforementioned person / patient referred to herein has been suitably maintained by the applicant/institution for the period ..... to .....</p> <p>I recommend that the allowance applied for be granted to the applicant for the purposes stated.</p> <p style="text-align: right;">..... SIGNATURE OF RESPONSIBLE PERSON*</p>	
<p>Full Names: .....</p> <p>Area for which appointed: .....</p> <p>Office ex officio: .....</p>	<div style="border: 1px solid black; width: 100px; height: 80px; margin: 0 auto;">DATE STAMP</div>

\*i.e. Minister of Religion / Social Worker / Superintendent of an Institution

<b>FOR OFFICE USE ONLY</b>	<b>APPLICATION APPROVED/NOT APPROVED</b>		<b>COMMENTS</b>	
	<b>PRINT NAME AND SURNAME</b>	<b>DATE</b>	<b>SIGNATURE</b>	