

BUILDING INDUSTRY BARGAINING COUNCIL (SOUTHERN- AND EASTERN CAPE)

(Registered under the Labour Relations Act 1995)
023-490-NPO

Private Bag 4089
KORSTEN (P.E.) 6014



F.G. Black Building
169 Haupt Street
SIDWELL (P.E.) 6001

Telephone 041 453 2751
Fax No 086 516 0534
E-mail holfund@bipcpe.co.za
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PAYOUT – OPTION FORM

EMPLOYER NUMBER

NAME OF BUSINESS

NB. CHOOSE ONLY ONE OPTION

OPTION 1: INDIVIDUAL CHEQUES FOR EMPLOYEES

Options Available in respect of Listings:

Please mark with X when applicable

- (a) In Employee Council registration number order, [C1]
or
(b) In alphabetical name order, [C0]
or
(c) In company number and/or clock number order [if on record] [C2]

Individual
Cheques printed
per Employee.
Listings in
format
requested

OR

OPTION 2: E.F.T. TOTAL TO EMPLOYER – BANK ADVICE/ **See Note at Bottom** STATEMENT PRINTED PER EMPLOYEE

Please mark with X when applicable

Options Available in respect of Listings:

- (a) In Employee Council registration number order, [S1]
or
(b) In alphabetical name order, [S0]
or
(c) In company number and/or clock number order [if on record] [S2]

E.F.T. Total to
Employer.
Listings in format
requested. The
Employer
transfers the
funds into
employees Bank
Account

NOTE: OPTION 2 : PLEASE ENSURE THAT YOUR BANKING DETAILS ARE REGISTERED WITH THE COUNCIL - SEE PAGE 2 OF THIS FORM

ALL REQUESTS I.R.O. THE ABOVE OPTIONS MUST BE SENT TO OUR OFFICES A.S.A.P., ATTENTION MRS. H. JACOBS.

Dear Sir/Madam,

RE: ELECTRONIC PAYMENTS

Kindly furnish us with your banking details when you choose Option 2 to enable the office to make electronic payments direct to your bank account.

Employer No.	:	
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Bank	:	
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Branch	:	
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Branch Code	:	
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Account Type	:	
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Account Number	:	
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Account Name	:	
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Postal Address	:	

Telephone No	:	
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Fax No	:	
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Email Address	:	
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PLEASE FAX BOTH PAGES IF ANY INFORMATION IS
FILLED IN ON THIS SIDE OF THE FORM

Should you require more information, please contact the office