CLAIM NO.:……

WORKMEN'S COMPENSATION ACT, 1941

DECLARATION BY DEPENDENT WIDOW OF A DECEASED WORKMAN

WIDOW'S POSTAL ADDRESS: ……

…… Postal Code ……

WORKMAN: …… Identity No. ……

EMPLOYER: ……

DATE OF ACCIDENT: …… DATE OF DEATH: ……

I, …… Identity No.: …… hereby declare that
(Full name and surname of widow)

At the time of the abovementioned accident, the workman (hereinafter referred to as the deceased) and I

1 *(a) were legally married

*(b) were married by custom

*(c) Neither the workman nor I was legally married but we were living together as a man and wife

(annexed hereto is my marriage certificate/other documentary evidence)

2 I was dependent upon the deceased for the necessaries of life.

3 I have received from the abovementioned employer N$ …… being ……

4 I am the legal guardian of the undermentioned natural children of the deceased: -

Full name and Surnames	Sex	Date of Birth
……	……	……
……	……	……
……	……	……
……	……	……
……	……	……
……	……	……

(Birth/Baptismal certificates are annexed hereto)

5 I am the legal guardian of the undermentioned adopted child(ren) of the deceased who was (were) dependent upon the deceased for the necessaries of life. -

Full name and Surnames	Sex	Date of Birth
……	……	……
……	……	……
……	……	……
……	……	……

6 To the best of my knowledge and believe the deceased *had no other/the undermentioned other dependents who were dependent on him for the necessaries of life: -

Full name and Surnames	Date of Birth	Sex	Relationship	Address
……	……	……	……	……
……	……	……	……	……
……	……	……	……	……
……	……	……	……	……

7 I am * expecting/not expecting a child in wedlock from the deceased workman

8 My surname immediately prior to my marriage to the deceased was ……

9 My date of birth is …… Signature of Widow ……

WITNESSES

1 …… 2 ……

10 I certify that before administering the oath/affirmation I asked the deponent the following questions and wrote down his/her answers in his/her presence:

(a) Do you know and understand the contents of the declaration? Answer ……

(b) Do you have any objection o taking the prescribed oath? Answer ……

(c) Do you consider the prescribed oath to be binding on your conscience? Answer ……

11 I certify that the deponent has acknowledge that he/she knows and understand the contents of this declaration which was sworn to/affirmed before me and the deponent's signature/thumb print/mark was placed thereon in my presence.

…… …… ……
Justice of the Peace/Commissioner of Oaths Designation (Rank) Ex Officio Republic of Namibia

Full name …… Place…… Date……

Business Address ……

…… Area for which Appointed……

*Delete whichever is not applicable