



labour

Department:  
Labour  
REPUBLIC OF SOUTH AFRICA



**DEPARTMENT OF LABOUR**  
**UNEMPLOYMENT INSURANCE ACT, 2001**  
**APPLICATION FOR RE-ISSUE OF PAYMENT**

The Department of Labour, \_\_\_\_\_

- ☐ Unemployment Insurance Commissioner
- ☐ Provincial Executive Manager
- ☐ Regional Head

I hereby apply for the re-issue of a payment which:

☐ I never received, as such payment was:

- Cancelled
- Paid into an unknown account

**Particulars of Payment**

\_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Amount R \_\_\_\_\_

Payable to \_\_\_\_\_

Address: \_\_\_\_\_

Identity/Passport  
Number

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**N.B. New UI 2.8 form to be attached.**

\_\_\_\_\_ Place

\_\_\_\_\_ Signature of Beneficiary

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ Witness

☐ Delete whichever is not applicable