



UNEMPLOYMENT INSURANCE ACT 63 OF 2001, AS AMENDED RESPONSE TO CORONA VIRUS

EMPLOYER DECLARATION

(Employer's full name & surname)	Identity Number													
Employed of	, UIF Ref Number										_			
Hereby declare that the Company and the employee above have agreed that the employee must self quarantine and not														
report for duty as a measure to curb the spread of Cord	ona virus from						_to_							
The application for UIF benefits lodged is for the period	stated above.													
Signed at:	on the							_						
EMPLOYEE'S SIGNATURE	COMPANY STAMP (if available)													
EMPLOYEE'S SIGNATURE														

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