Appendix A

NBC DIGITAL PLATFORM: Client Access for Retirement Fund Clients EMPLOYER ACCESS AUTHORISATION FORM

This form is to be c		ployer's Chief Executiv	ve Officer or Managing
Fund Name:	Contract cleaning N	lational Provident Fund	d
Employer Name:			
Employer Web Repres	entatives		
SURNAME	FIRST NAME	ID NUMBER	SIGNATURE
DECLARATION		-	
I, the undersigned, hereby app to all the confidential fund reco	ords of our employees who are	as EMPLOYER WEB REPRESE e members of the Fund.	NTATIVES who will have access
I acknowledge and understand	G		
https://www.nbc.co.	za/NBC/NBCLAND/ContentR	ne disclaimer that can be found at edirector.aspx?ContentId=411	and failing receipt of changes NBC
will regard the above	e people to be authorised emp	ployer representatives	stand that all user access granted
is for their own use arise and it is shown	only and may not be shared w	rith any other person or third party tive has provided his or her login	for any reason. Should a dispute
Full Name (Please Print):		
Signature:			
Date:			

Employer Stamp:

Appendix B

NBC DIGITAL PLATFORM: Client Access for Retirement Fund Clients

DIGITAL PRODUCT ACCESS FORM ONLINE CLAIMS FORMS ("OCF")

This form is to be completed by the Employer Appointed Personnel

Inis form is to be completed by the Employer Appointed Personnel			
Fund Name: Contract Cleaning National Provident Fund Employer Name: PRODUCT DETAILS Product Name OCF (Online Claim Forms) Implementation Date			
Access to OCF in ACCESS AUTH Access to OCF in https://www.nbc. OCF has been concerned in the submitted in t	data and/or file exchanges, authorizations or information provided on the website where such data and/or nges and/or information are supplied by the Employer's Chief Executive Officer or Managing Director athorised Employer Representative. hrough user-specific login credentials which may not be shared or disclosed to any third party and		
DECLARATION I the undersigned a Full Name (Please Signature: Date:	cknowledge the Product Details and Particulars as outlined above. Print):		

Appendix B

NBC DIGITAL PLATFORM: Client Access for Retirement Fund Clients

DIGITAL PRODUCT ACCESS FORM ADMINISTRATION SERVICES KIOSK ("ASK")

This form is to be completed by the Employer Appointed Personnel				
Fund Name: Employer Name:				
		PRODUCT DETAILS		
Product Name	Product Name ASK (The NBC Administration Services Kiosk)			
Implementation Date				
Product Details and Pa	articulars			
 Access is granted s <u>https://www.nbc.co.</u> ASK has been desig ASK access is throu Employer represent 	ubject to the za/NBC/NB0 gned for Inte ugh user-specatives will ha	mployer Representatives and Individual Fund Members; NBC disclaimer that can be found at: CLAND/ContentRedirector.aspx?ContentId=411 street Explorer 8 and above exific login credentials which may not be shared or disclosed to any third party ave access to employee information relevant to the Employer (group access) and to their own information		
DECLARATION				
I the undersigned ackno	wledge th	e Product Details and Particulars as outlined above.		
Full Name (Please Print): _			
Signature:				
Date:	_			





52 8UOV	10				
First Name	Surname	ID Number	Email Address	Mobile Number	Alternate number
1					
2					
3					
,					
4					
5					
6					
7					
1					
8					
9					
10					
11					
**					
12					
13					



Providing Client Access to the NBC Digital Platform

Retirement Fund Clients

May 2014

Document Version Information

Document Date	Version Number	Version	Issued By
12 August 2014	002	DRAFT	NBC ICT
25 September 2014	003	FINAL	NBC ICT

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1. Overview

The NBC Digital Platform ("THE PLATFORM") is a set of integrated electronic applications provided and hosted by NBC ICT. THE PLATFORM allows NBC Clients (that may include individual members, employer representatives, brokers, fund trustees or other third parties) access to information held in various forms on various NBC databases.

The entry point of THE PLATFORM is NBC-LAND which can be accessed via the NBC Holdings (Pty) Ltd. website at https://www.nbc.co.za.

NBC-LAND provides a 'MY-NBC' service which allows Clients direct access to various applications. These applications are known as 'Virtual Products'. Clients have access to Virtual Products based on their unique service level agreements, contracts or products combinations.

By accessing NBC services via the NBC Digital Platform clients have secure, login-based access to confidential, personal information.

This document has been created to provide details of access requirements and procedures to be followed when providing access to the various NBC services accessed via THE PLATFORM for Retirement Fund Clients.

Retirement Fund clients are granted access on the basis that the relevant governing bodies and structures relevant to the specific Fund type have given authorisation for the access to be granted.

To ensure that there is a secure, auditable record of all access granted to THE PLATFORM it is important that the formal procedure, as outlined in this document is followed.

There is a requirement that all access to THE PLATFORM, for Retirement Fund clients is authorised by the Board of Trustees and, where applicable the duly authorised Participating Employer representatives.

All Employer-level access, where an employer representative has access to all member records, will only be granted on authorisation of the Board of Trustees (through a resolution) and the Employer CEO or Managing Director (or equivalent positions where these do not exist).

For these purposes the procedure includes authorisation forms.

2. THE PLATFORM Disclaimer

The disclaimer that is applicable to all services hosted on or accessed through THE PLATFORM can be found at the following URL:-

https://www.nbc.co.za/NBC/NBCLAND/ContentRedirector.aspx?ContentId=411

3. Procedure for granting access to THE PLATFORM

NBC internal process.

4. Required Forms

The following forms are required for all new data loads onto THE PLATFORM

- 1. NBC Digital Platform Access Authorisation Form (one per Employer) (Appendix A)
- 2. Digital Product Access Form (one per Product) (Appendix B)
- 3. Employer Web Representative Details Form (one per Employer Representative) (Appendix C)

A sample of each form is attached for information purposes.

APPENDIX A: SAMPLE EMPLOYER ACCESS AUTHORISATION FORM

This form is to be completed by the Employer's Chief Executive Officer or Managing Director			
Fund Name: <u>TI</u>	ne Contract Cleaning Natio	onal Provident Fund (CCNPF)	
Employer Name:			
Employer Web Represent	tatives		
SURNAME	FIRST NAME	ID NUMBER	SIGNATURE
DECLARATION	<u>I</u>		
	t the manage/a listed above on EA	ADLOVED MED DEDDECENTATIVES	Nude a will be used a second
to all the confidential fund records		MPLOYER WEB REPRESENTATIVES bers of the Fund.	s who will have access
I acknowledge and understand th	e following:-		
 https://www.nbc.co.za/f The Employer Represe will regard the above permission 	eople to be authorised employer	or.aspx?ContentId=411 ed when a change arises and failing r representatives	
is for their own use only arise and it is shown the	and may not be shared with an	rm acknowledge and understand that y other person or third party for any re is provided his or her login credentials	eason. Should a dispute
Full Name (Please Print):			
Signature:			
Date:			
Designation:			
Employer Stamp:			

APPENDIX B: SAMPLE DIGITAL PRODUCT ACCESS FORM: ADMINISTRATION SERVICES KIOSK ("ASK")

This form is to be completed by the Employer's Chief Executive Officer or Managing Director		
Fund Name: The Co	ontract Cleaning National Provident Fund (CCNPF)	
Employer Name:		
	PRODUCT DETAILS	
Product Name	ASK (The NBC Administration Services Kiosk)	
Implementation Date		
Product Details and Particul	ars	
Access is granted subject to https://www.nbc.co.za/NBC/ ASK has been designed for ASK access is through user	o Employer Representatives and Individual Fund Members; the NBC disclaimer that can be found at: (NBCLAND/ContentRedirector.aspx?ContentId=411) Internet Explorer 8 and above -specific login credentials which may not be shared or disclosed to any third party ill have access to employee information relevant to the Employer (group access) and ess to their own information	
DECLARATION		
I the undersigned acknowledge	the Product Details and Particulars as outlined above.	
Full Name (Please Print):		
Signature:		
Date:		
Designation:		

APPENDIX B: SAMPLE DIGITAL PRODUCT ACCESS FORM: ONLINE CLAIMS FORMS ("OCF")

This form is to be completed by the Employer's Chief Executive Officer or Managing Director		
Fund Name:	The Contract Cleaning National Provident Fund (CCNPF)	
Employer Name:		
	PRODUCT DETAILS	
Product Name	OCF (Online Claim Forms)	
Implementation Date		
Product Details and F	Particulars	
Access to OCF is ACCESS AUTHO Access to OCF is https://www.nbc.oc OCF has been de NBC will not be liab	product that forms part of the NBC Digital Platform; provided to authorised employer web representatives as per the NBC DIGITAL PLATFORM RISATION FORM; granted subject to the NBC disclaimer that can be found at: o.za/NBC/NBCLAND/ContentRedirector.aspx?ContentId=411; signed for Internet Explorer 8 and above; lole for any damages, loss, costs and expenses (whether direct or consequential), caused by: npromise of a pin or password by an authorised employer web representative rruption, malfunction, downtime or other failure of the website, database or any component thereof, by third parties. Is, data and/or file exchanges, authorizations or information provided on the website where such data le exchanges and/or information are supplied by the Employer's Chief Executive Officer or Managing or or other authorised Employer Representative. Tough OCF will be regarded as authorised instructions to the Fund Administrators; imps and/or applications through OCF will be regarded as authorised and the user submitting the knowledges that his or her electronic submission is regarded as an electronic signature in line with slation regarding electronic communications; defined that any and all fraudulent submissions will be the responsibility of the Employer where such the from employer representative logins and login credentials; by the employer will be regarded as an overriding instruction in terms of any and all previous greements regarding documentation submission, original documents and authorised signatories.	
DECLARATION I the undersigned acknowledge	owledge the Product Details and Particulars as outlined above.	
andoroigned dolling		
Full Name (Please Print	·):	
Signature:		
Date:		

APPENDIX C:

Please complete the Excel file – attached.

NB:- All persons listed on the Appendix A Form.