

# 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 were living together as man and wife  
 (annexed hereto is my marriage certificate/other documentary evidence)

2. I was dependant upon the deceased for the necessities 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) dependant upon the deceased for the necessities 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 dependants who were dependant on him for the necessities 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 hi/her answers in his/her presence:

- (a) Do you know and understand the contents of the declaration? Answer .....
- (b) Do you have any objection to 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 .....

\*Delete whichever is not applicable