



Customer Information Update Form for Change of Date of Birth

RSA PIN

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TITLE:MR MRS MISS OTHERS

SURNAME: _____

FIRST NAME: _____

MIDDLE NAME: _____

OLD DATE OF BIRTH:

--	--	--	--	--	--

Day Month Year

NEW DATE OF BIRTH:

--	--	--	--	--	--

Day Month Year

MOBILE NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

I have included the following:

1. Letter from Employer indicating the correct date of birth
2. Application letter from customer indicating the correct date of birth
3. Sworn Court Affidavit for Age Declaration or Certificate of Birth
4. Record of Service (For Public Sector Only)

Customer's Name/Signature _____ Date _____

FOR OFFICIAL USE ONLY
Action taken internally: _____
Name of action taker/Signature: _____
Date: _____
Name of Authorizer/Signature/Date: _____