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**DEPARTMENT OF DEFENCE AND MILITARY VETERANS**

NO. 6483

5 August 2025

**MILITARY VETERANS ACT, 2011  
(ACT NO. 18 OF 2011)****PUBLICATION OF THE MILITARY VETERANS PENSION BENEFIT AMENDMENT  
REGULATIONS, 2025**

I, Matsie Angelina Motshekga - Minister of Defence and Military Veterans, hereby in terms of section 24 (3) of Military Veterans Act, 2011 Act No 18 of 2011, publish Military Veterans Pension Benefit Amendment Regulations 2025 in the Government Gazette for implementation of the Pension Benefit.

**Ms M.A MOTSHEKGA, MP****MINISTER OF DEFENCE AND MILITARY VETERANS****DATE:**



**military veterans**

Department:  
Military Veterans  
REPUBLIC OF SOUTH AFRICA

## **SUBMISSION OF INPUTS FOR DEPARTMENT OF MILITARY VETERAN'S PENSION BENEFIT**

Enquiries and / or inputs can be submitted using the following platforms: -

Attention: -Legal Services

**Hand to:**

328 Festival Street

Hatfield

Pretoria

0083

**By email to:**

[Pensionreg@dmv.gov.za](mailto:Pensionreg@dmv.gov.za)

## **SCHEDULE**

In these regulations “Regulations” means the regulations published in the Government notice NO. R. 3949 in 2023.

### **Amendment of definitions of the Regulations**

1. Definition of the “Means Test” is introduced in these amendment
2. Definition of the Government Pensions Administration Agency is introduced in these amendments

### **Amendment of regulation 4 of Regulations**

3. Regulation 3 (1), (2), (3), (4) is introduced to address the Means Test

### **Introduction of Regulation 6**

4. Regulation 6 (1), (2), (3) is introduced to address recovery of monies overpaid or erroneously paid to the beneficiaries

### **Introduction of Regulation 9**

5. Regulation 9 (1), (2), (3) is introduced to enhance the exclusions from this benefit

### **Introduction of Regulation 10**

6. Regulation 10 (1), (2), (3) is introduced to address the suspension of the benefit

### **Short title and commencement**

These Regulations are called the Military Veterans Pension Regulation, 2025. The effective date in respect of the commencement of this benefit will not be retrospective, but only applicable upon the signing off these regulations by the respective authority. Payment to Military Veterans will not be retrospective but applicable upon the approval of the application.

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9. Exclusions
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### Definitions

1. In these Regulations any word or expression to which the meaning has been assigned in the Act has a meaning so assigned and, unless the context otherwise indicates—

**“birth certificate”** means an official document of the child reflecting the particulars of both parents including their identity numbers;

**“Dependents”** is defined in terms of the definition as defined in the Military Veterans Act 18 of 2011. In these regulations the following categories shall be accommodated: widows, widowers and children under 18 years of age, between 18 and 23 must be full time in school and dependant with disability of any age.

**“identity document”** means the identity document or card referred to in the Identification Act, 1997 (Act No. 68 of 1997);

**“Means test”** means the evaluation of the income and assets of the person applying to determine whether the person’s means are below a stipulated amount. This Means Test is a way of determining whether a person qualifies to receive the pension as the pension is indeed meant for those who have insufficient means to support themselves;

**“national military veterans database”** means the official computerised information system established and maintained by the Department of Military Veterans containing the names and personal information of verified military veterans and the list of the dependents registered;

**“the Act”** means the Military Veterans Act, 2011 (Act No.18 of 2011); and

“the Agency” means the Government Pensions Administration Agency (GPAA).

## **2. Objectives**

The object of these Regulations is to provide Pension to Military Veterans in terms of section 5(1)(h) of the Act.

## **3. Eligibility**

(1) Only Military Veterans and dependents may qualify for this pension benefit in terms of Subject to section 5 of the Act.

(2) For the purpose of sub regulation (1), a Military Veteran is —

(a) a person who is —

(i) a citizen of the Republic of South Africa.

(ii) as defined in the Military Veterans Act, 2011, and

(iii) listed in the Department of Military Veterans' National Military Veterans database.

(iv) Veterans, Widows, widowers and dependants must be residing within the borders of the Republic

(3) A qualifying Military Veteran, spouse or dependent of a deceased military veteran residing in the Republic of South Africa will be subject to a means test in line with the old age grant as contemplated in section 5 (2) (a) and (b) of the Social Assistance Act, 2004 (Act No.13 of 2004).

(4) A military veteran or spouse of a deceased military veteran receiving the pension benefit must in writing, inform the Department of Military veterans of the “change of employment status” within 90 days that the change of employment status became effective.

(5) The annual update on the threshold amounts in sub-regulation (1) will be aligned to those of the old age grant as would be pronounced by the Minister of Finance and gazetted in terms of the Social Assistance Act 13 of 2004.

## **4. Pension benefit amount**

(1) A qualifying Military Veteran will receive a monthly pension income, calculated based on the amount of the old age grant contemplated in section 10 of the Social Assistance Act, 2004 (Act No.13 of 2004) adjusted by a multiplier of 2,5.

(2) A dependent, widow or widowers of a deceased Military Veteran qualify to receive up to 50% of the pension benefit provided they are not receiving any form of pension above the mentioned 50% threshold from the Military Veteran pension benefit.

(3) A dependant, who became an orphan, is entitled to receive the monthly pension in terms of paragraph 4 (2)—

(a) until the orphan reaches the age of 18;

(b) until the orphan reaches the age of 23, if the orphan is a fulltime student (provided he or she provides proof that he/she is still attending an educational institution annually);

or

is suffering for total disability or permanent impairment by the time of death of the main member, will continue to receive monthly pension benefit until he or she dies.

#### **6. Recovery of sums overpaid**

(1) If the Agency pays money to a person in the belief that he or she is entitled thereto in terms of the Act or any law repealed by the Act, but he or she was not entitled thereto, the amount of money so paid is an amount due and payable to the State by such a person or, if he or she is deceased, by his or her estate.

(2) The Agency must recover the amounts to which a person was not entitled, as contemplated in subsection (1), in accordance with the Public Finance Management Act, 1999.

(3) The Minister shall remit an amount owing by a person in terms of subsection (1) if such a person satisfies the Minister that he or she received the amount without knowing if he or she was not entitled thereto.

#### **7. Procedure for application for a military veterans pension benefit**

(1) An application for a military veterans pension benefit must be submitted on a form MVP01\_2022 contained in Annexure A.

(2) An application contemplated in sub-regulation (1), must be accompanied by—

(a) certified copy of the identity document of the Military Veteran;

(b) certified copy of the identity document of the spouse;

(c) a recognized marriage certificate;

- (d) certified copies of the unabridged birth certificates of the dependents of the Military Veteran, and;
  - (e) signed bank entity form with applicant's account numbers, stamped by the bank
- (3) The applicant must submit an application to the Government Pensions Administration Agency (GPAA) either by—
  - (a) hand;
  - (b) registered post; or
  - (c) electronically.
- (4) On receipt of an application made in terms of sub-regulation (1), the Government Pensions Administration Agency (GPAA) must furnish the Military Veteran with an acknowledgement of receipt of such application within 90 days, which must—
  - (a) reflect the name and identity number of the Military Veteran;
  - (b) reflect the names of the designated officials acknowledging receipt thereof; and
  - (c) be dated and stamped with the official stamp of the GPAA.
- (5) The Government Pensions Administration Agency must keep a register of all applications received. The register must record the following—
  - (a) acknowledgement of receipts of the applications;
  - (b) the particulars of the Military Veteran;
  - (c) the date of the application;
  - (d) the date on which the application is approved or rejected; and the date of the first payment contemplated.
- (6) If an application for the military veteran pension benefit is approved, the Government Pensions Administration Agency must inform the Military Veteran, in writing or by electronic communication or any other means of communication of such approval.

## **8. Appeals**

- (1) If an application for the military veterans pension benefit is rejected, the GPAA must inform the Military Veteran in writing by electronic communication or any other means of communication of such rejection and of—
  - (a) the reasons for such rejection; and
  - (b) the applicant's right, if he or she disagrees with the GPAA's decision, to lodge an appeal with the Military Veterans Appeal Board established in terms section 19 of the Act.

(2) If the Military Veteran disagrees with the decision of the GPAA, the Military Veteran may within a period not exceeding 90 days of the date of the decision, lodge an appeal.

(3) When lodging an appeal, the Military Veteran may not submit any evidence or information which was not provided to the GPAA at the time of the application.

(4) The Appeal Board must consider the appeal by reassessing the decision of the Department against the available information at its disposal and has the powers to either confirm or set aside the decision of the GPAA.

(5) The Appeal Board must finalise the appeal within 90 days from the date on which the appeal was received and must inform the Military Veteran by electronic communication or any other means of communication of the decision and reasons thereof.

## **9. Exclusions**

(1) A Military Veteran and or spouse of a deceased military veterans who receives another State provided pension or social grant that is more than the Pension amount is excluded from benefiting from this pension benefit, except if this pension will top-up what is already received.

(2) A Military Veteran and or spouse of a deceased military veteran who upon retirement transfers the state pension to a privately owned institution or receives another State provided pension or social grant is excluded from this pension benefit, except if this pension will top-up what is already received.

(3) A Military Veteran and or spouse of a deceased military veterans who resigned or left state employment due to other reasons and received all their pension contributions is excluded from benefiting from this pension benefit.

(4) A military Veteran and or spouse of a deceased military veterans who currently who are employed and contributing to a pension fund are excluded from this pension benefit.

## **10. Suspension Of Pension**

(1) Every military veteran pension recipient has the responsibility to inform DMV and GPAA of any change in his or her circumstances whether this is a change of address, change of marital status, change of financial position,



- (2) The following may result in the suspension of the pension—
- (a) Changes in circumstances (financial; employment)
  - (b) Committing a fraudulent activity or misrepresentation.
  - (c) Where the pension was approved in error.

## **11. REPEAL OF LAWS**

This Regulations repeals the Military Veterans Pension Regulations, 2023.

## **12. Short title**

These Regulations are called the Military Veterans Pension Amendment Regulations, 2025.



**military veterans**

Department:

Military Veterans

**REPUBLIC OF SOUTH AFRICA**

# **DEPENDENTS PENSIONS BENEFIT ACCESS FORM**

**MVP02-2022**

*MILITARY  
VETERANS  
ACT, (Act no.  
18 of 2011)  
SECTION  
5(1) (h).*



# military veterans

Department:  
Military Veterans

REPUBLIC OF SOUTH AFRICA

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FORCE NUMBER /DMV SERIAL NUMBER

## 1. PERSONAL DETAILS OF THE DECEASED MILITARY VETERAN

TITLE	INITIALS	FULL NAMES	SURNAME
GENDER	IDENTITY NUMBER	MARITAL STATUS AT TIME OF DEATH	
		MARRIED	WIDOWED
		NEVER MARRIED	DIVORCED
DATE OF DEATH	PLACE OF DEATH	DEATH CERTIFICATE NUMBER	
Y Y M M D D			

## 2. DETAILS OF THE APPLICANT

TITLE	INITIALS	FULL NAMES	SURNAME
GENDER	IDENTITY NUMBER	EMAIL ADDRESS	
CELL PHONE NUMBER	ALTERNATIVE CONTACT NUMBER	RESIDENTIAL ADDRESS	
		POSTAL CODE	
		PROVINCE	
RELATIONSHIP TO THE DECEASED			
SPOUSE	BIOLOGICAL CHILD UNDER 23	BIOLOGICAL CHILD OVER 23	BIOLOGICAL CHILD WITH DISABILITY
			CO-HABITING PARTNER

Completed application form together with the required supporting documents can be submitted at any GPAA offices or emailed to [Milvet.applications@gpaa.gov.za](mailto:Milvet.applications@gpaa.gov.za).

Enquiries should be directed to [Milvet.enquiries@gpaa.gov.za](mailto:Milvet.enquiries@gpaa.gov.za) contact number 080 7723 646



# military veterans

Department:  
Military Veterans

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FORCE NUMBER /DMV SERIAL NUMBER

### 3. DETAILS OF DEPENDENTS OF THE DECEASED

	DEPENDENT	DEPENDENT	DEPENDENT	DEPENDENT
NAME				
SURNAME				
ID NUMBER				
RELATIONSHIP TO THE DECEASED				
ADDRESS				
SCHOOL ATTENDANCE (YES/NO)				
CONTACT				

### 4. ADDITIONAL INFORMATION

4.1 WAS THE DECEASED MILITARY VETERAN RECIPIENT OF THE DMV PENSION BENEFIT?	YES	NO
4.2 IF YOUR ANSWER IS NO ON 4.1 ABOVE, STATE REASONS FOR ENTITLEMENT		
4.3 DID THE DECEASED HAVE ANY LEGAL OBLIGATIONS TOWARD A THIRD PARTY IN TERMS OF THE MAINTENANCE ORDER?		
	YES	NO
4.4 BESIDES THE DEPENDENTS LISTED IN PARAGRAPH 3 ABOVE, ARE THERE OTHER DEPENDENTS NOT LISTED?		
	YES	NO
4.5 WAS THE APPLICANT AND THE DECEASED STAYING TOGETHER AT THE TIME OF DEATH?		
	YES	NO
4.6 PROVIDE ANY OTHER INFORMATION YOU FEEL THE DEPARTMENT MUST CONSIDER WHEN EVALUATING YOUR APPLICATION		

Completed application form together with the required supporting documents can be submitted at any GPAA offices or emailed to [Milvet.applications@gpaa.gov.za](mailto:Milvet.applications@gpaa.gov.za).

Enquiries should be directed to [Milvet.enquiries@gpaa.gov.za](mailto:Milvet.enquiries@gpaa.gov.za) contact number 080 7723 646



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FORCE NUMBER /DMV SERIAL NUMBER

## 5. BANK DETAILS OF THE APPLICANT

SURNAME											INITIALS		
ID NUMBER											NAME OF BANK		
ACCOUNT NUMBER											BRANCH CODE		
SIGNATURE OF ACCOUNT HOLDER											INITIALS AND SURNAME OF BANK OFFICIAL		
											OFFICIAL STAMP OF BANK		

## 6. DECLARATION AND CONSENT

I, the undersigned (*Full Names*)

I consent to and authorise the Department of Military Veterans to contact any person or entity for purposes of obtaining or verifying such information or documentation related to my application to access the Pension Benefit.

I further acknowledge that the Department of Military Veterans is committed to protecting and promoting the privacy of my personal information and any other individuals or organisations to give effect to the right to privacy and to fulfil its obligations under the Protection of Personal Information Act No 4 of 2013 ( Hereinafter 'POPI').

The DMV acknowledges and agrees that the Personal Information will not, under any circumstances, be processed for purposes prohibited by POPI and/or the principles contained in POPI and that the processing of Personal Information will be done fairly and in accordance with legal provisions, given that the purpose for which processing of the Personal Information is adequate, relevant and not excessive. I herewith defend, indemnify and hold harmless the DMV from any action or claim of any nature, personal loss, injury or damage arising directly or indirectly from any act or omission on my part relating to or incidental to the failure from my part to honour the above provisions, or otherwise, as the case may be.

I am the applicant whose details appear in this application form acknowledge and agree that I have read this form in its entirety and that I fully understand the nature, content and implications hereof and agree hereto, and that I shall be fully bound hereto from date of signature hereof.

The content of the said application form falls within my personal knowledge, unless stated otherwise, and are both true and correct.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
IDENTITY NUMBER

\_\_\_\_\_  
DATE

Completed application form together with the required supporting documents can be submitted at any GPAA offices or emailed to [Milvet.applications@gpaa.gov.za](mailto:Milvet.applications@gpaa.gov.za).

Enquiries should be directed to [Milvet.enquiries@gpaa.gov.za](mailto:Milvet.enquiries@gpaa.gov.za) contact number 080 7723 646



## military veterans

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FORCE NUMBER /DMV SERIAL NUMBER

DOCUMENTS CHECKLIST		ATTACHED	NOT ATTACHED
1.	Application form MVP02-2022, fully completed and signed		
2.	Certified Identity Documents Military Veteran		
3.	Certified copy of death certificate of the Military Veteran		
4.	Certified Identity Documents of Applicant		
5.	Certified Marriage Certificate/Proof of spousal relationship		
6.	Unabridged birth certificates of dependents up to 23 years		
7.	Certified court order for (adoption, foster care, maintenance order etc to confirm dependency on deceased military veteran)		
8.	Medical report detailing disability status of any dependent		
9.	Dependent Proof of registration and attendance at educational institution		
10.	Copy of applicant's personal bank statement		
11.	Signed and stamped bank entity form with applicant's account numbers		

Completed application form together with the required supporting documents can be submitted at any GPAA offices or emailed to [Milvet.applications@gpaa.gov.za](mailto:Milvet.applications@gpaa.gov.za).

Enquiries should be directed to [Milvet.enquiries@gpaa.gov.za](mailto:Milvet.enquiries@gpaa.gov.za) contact number 080 7723 646



ANNEXURE A

**PENSIONS  
BENEFIT  
ACCESS  
FORM -  
MVP01\_2025**

MILITARY  
VETERANS  
ACT, (Act no.  
18 of 2011)  
SECTION 5(1)  
(h).

1. PERSONAL DETAILS																															
1.1. SURNAME																1.2. FULL NAMES															
1.3. INITIALS								1.4. IDENTITY NUMBER																1.5. GENDER							
1.6. CELL NO																1.7. ALTERNATIVE CELL NO.															
1.8. FORCE NUMBER																TAX NUMBER															
1.9. RESIDENTIAL ADDRESS																															
																1.10. PROVINCE															
1.11. POSTAL CODE								1.12. EMAIL ADDRESS																							
1. MARITAL STATUS				MARRIED				WIDOWED				NEVER MARRIED				DIVORCED															
2. DETAILS OF SPOUSE (S) IF MARRIED																															
2.1. INITIALS AND SURNAME				2.2. IDENTITY NUMBER								2.3. TYPE OF MARRIAGE APPLICABLE (E.g. CIVIL, CUSTOMARY, ETC)								2.4. CONTACT DETAILS											
3. DETAILS OF DEPENDENTS (Proof of dependency required if not reflected in the unabridged certificate)																															
3.1. INITIALS AND SURNAME								3.2. IDENTITY NUMBER								3.3. RELATIONSHIP								3.4. CONTACT DETAILS							



**4. CRITERIA TO QUALIFY FOR PENSIONS BENEFIT**

4.1. ARE YOU REGISTERED IN THE NATIONAL MILITARY VETERANS DATABASE OF THE DEPARTMENT OF MILITARY VETERANS?	YES	NO
4.2. WHICH MILITARY FORCE WERE YOU A MEMBER OF PRIOR TO 1994?		
4.3. ARE YOU A RECIPIENT OF PENSION OR SOCIAL GRANT FROM ANY INSTITUTION?	YES	NO
4.4. IF YOU ANSWERED YES IN QUESTION 4.3 ABOVE, WHICH PENSION OR SOCIAL GRANT ARE YOU A RECIPIENT OF?		
4.5. STATE THE INSTITUTION(S) PROVIDING PENSION OR SOCIAL GRANT		
4.6. ARE YOU CURRENTLY EMPLOYED?	YES	NO
4.7. IF YOU ANSWERED YES IN QUESTION 4.6 ABOVE, WHAT IS YOUR ANNUAL INCOME		
4.8. IF MARRIED, WHAT IS THE VALUE OF YOUR COMBINE INCOME WITH YOUR SPOUSE?		
4.9 IF SINGLE, WHAT IS THE VALUE OF YOUR CURRENT ASSETS?		

**5. DECLARATION AND CONSENT**

I, the undersigned (*Full Names*)

.....  
I consent to and authorise the Department of Military Veterans to contact any person or entity for purposes of obtaining or verifying such information or documentation related to my application to access the Pension Benefit.

I further acknowledge that the Department of Military Veterans is committed to protecting and promoting the privacy of my personal information and any other individuals or organisations to give effect to the right to privacy and to fulfil its obligations under the Protection of Personal Information Act No 4 of 2013 ( Hereinafter 'POPI').

The DMV acknowledges and agrees that the Personal Information will not, under any circumstances, be processed for purposes prohibited by POPI and/or the principles contained in POPI and that the processing of Personal Information will be done fairly and in accordance with legal provisions, given that the purpose for which processing of the Personal Information is adequate, relevant and not excessive. I herewith defend, indemnify and hold harmless the DMV from any action or claim of any nature, personal loss, injury or damage arising directly or indirectly from any act or omission on my part relating to or incidental to the failure from my part to honour the above provisions, or otherwise, as the case may be.

I am the applicant whose details appear in this application form, acknowledge and agree that I have read this form in its entirety and that I fully understand the nature, content and implications hereof and further agree that should I give wrong information, my application may be rejected accordingly, and that I shall be fully bound hereto from date of signature.

The content of the said application form falls within my personal knowledge, unless stated otherwise, and are both true and correct.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
IDENTITY NUMBER

\_\_\_\_\_  
DATE

Before submitting the form first verify if you are registered on the DMV Database and your information is up-to-date

**THIS FORM IS NOT FOR SALE**

## FOR OFFICIAL PURPOSES

## DOCUMENT CHECKLIST

DOCUMENT REQUIRED	ATTACHED	NOT ATTACHED
Application form - MVP01_2022		
Certified Identity Documents of the Military Veteran		
Certified copy of Identity Documents of the Spouse (s)		
Certified copy of an officially recognized marriage certificate(s)		
If employed , certified proof of latest income		
Certified copies of the unabridged birth certificates of the dependents of the Military Veteran		
Signed bank entity form with applicant's account numbers, stamped by the bank		

Completed application form together with the required supporting documents can be submitted  
at any GPAA

offices or emailed to [Milvet.applications@gpaa.gov.za](mailto:Milvet.applications@gpaa.gov.za).

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