

APPLICATION FOR PAYMENT FROM RETIREMENT SAVINGS ACCOUNT. - PUBLIC SECTOR

I hereby apply for withdrawal from my Retirement Savings Account (RSA). Find below my application details:

RSA Number

Date: (dd-mm-yyyy)

P	E	N																		
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**Affix
Passport
Picture
Here**
(Kindly write
your RSA PIN on
the reverse
side)

Title	Surname	First name	Other names
Sex	E-mail	Date of Birth (dd-mm-yyyy)	

Residential address (Kindly note that the address & phone number would be used for further correspondence with you)

Mobile Number																					Alternate Number																				
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NOK Details

NOK Name (Surname First)	NOK Telephone Contact
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Last Employer details

Employer Name	
Department	Designation

Bank Payment details

BVN

Bank Account Number																					Bank Name																				
																				Bank Branch																					

Bankers Confirmation Letter	Statement of Account	Photocopy of Cheque-leaflet
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Please note: ONLY applications with complete documents would be accepted and processed.

APPLICATION CHECK LIST FOR PUBLIC SECTOR		Official Use	Mode of exit
Retirement letter		Termination	
Retirement benefit registration slip		Resignation	
Letter of first appointment/Attestation letter		Voluntary retirement	
Official ID (staff ID with any Regulatory ID card)		Mandatory retirement	
Document validating bank details		Others (specify)	
Pay slip for any of the last three months			
A passport photograph			
Proof of enrollment with LPPFA			
Agreement (Pw/Annuity) with Consent form			

Note: ALL alterations on this form **MUST** be counter signed by the Customer.

Confirm AVC on RSA (Yes/No)

Do you want to Consolidate AVC and Normal Contributions? (Yes/No)

I confirm that the information supplied above by me is true and correct and hereby indemnify LEADWAY PENSURE PFA LTD, and its officers from any liability whatsoever arising out of untrue information provided by me above.

Customer's Name	Customer's Signature & Date
Official use	
Confirm Passport picture of customer with physical appearance	Confirm signature (branches with midas)

I hereby certify that original copies of all documents submitted were sighted by me, and the application was duly completed.

Name of Receiving Officer Signature & Date Branch Telephone number

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Acknowledgement -- Customer's copy

PEN..... Name of Customer.....

Bank Account Number	Bank Name	Bank Branch

APPLICATION CHECK LIST

Separation letter and Letter of first appointment	Pay slip for any of the last three months
Retirement benefit registration slip	A passport photograph
Document validating bank details	Agreement (Pw/Annuity)
Proof of enrollment with LPPFA	Official ID (staff ID with any Regulatory ID card)

Name of Receiving Officer Signature & Date Branch Telephone Details

Dear Customer, kindly ensure to collect and keep this acknowledgement for record purpose. For further enquiries, please contact us on 01-2800800 or 07007367873.

We shall also update you on the progress of your application at every stage of processing till payment of your benefit

Privacy Statement - Consent Clause
Leadway Pensure PFA is strongly committed to protecting your privacy. The information in this document is collected from you primarily to make for easier and more rewarding administrative purposes. You have the right to give and also withdraw your consent to the collection and processing of your information at any time. By filling this form, you agree that the information you provide can be used for the stated purposes. For further information, please visit <https://leadway->