APPLICATION FOR PAYMENT FR		NT SAVIN		IINT - FO		pensure
I hereby apply for withdrawal from my Retirement						
RSA Number				-mm-yyyy)		
PEN		Γ				
		L			Af	fix Passport
Title Surname First name Othernan			Othernames	Disture Llava		
The sumane This name						(Kindly write your RSA
Sex E-mail		I	Date of	Birth (dd-mm	-yyyy) PIN o	n the reverse side)
				·		
Residential address (Kindly note that the addre	ss & phone number	would be use	ed for furthe	r corresponde	nce with	
Mobile	Foreign					
Number	Contact					
Foreign contact address						
Last employer details						
Employer Name						
		Decignat				
Department		Designat	10N			
Bank Payment details				BVN		
Bank	Bank Name					
Account	Bank Branch					
Number						
Kindly provide us with any of the following docun	ients below to furth	ner validate tr	ne bank deta	ils provided at	pove.	
Kindly tick the correct option provided.	<u>.</u>					
Devices Confirmation Lattor	Statement /	- 6 A -count		n	of Choo	··· lasflat
Bankers Confirmation Letter	Statement o	of Account		٢	hotocopy of Cheq	ue-leatlet
Please note: ONLY applications with complete docu	ments would be acc	ented and pro	ocessed.			
		.cpicer			Note: AL	L alterations
APPLICATION CHECK LIST FOR FOREIGNE	R Official Use	Mode of ex		•		orm MUST be
Disengagement/separation letter Termination					counter	signed by the
Letter from ex-employer on accrued		Resignation	ation Ci ary retirement Ci		Custome	
Document validating bank details Age declaration/birth certificate			retirement y retirement		4	
Copy of valid International Passport			ndatory retirement			
A passport photograph		Others spec			1	
Proof of enrollment with LPPFA]	
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		Custome	er's Signatur	re& Date		
C Contract sisters of systems with shusi	OFFICIAL U		C firm aig	ture (bronch	······································	
Confirm passport picture of customer with physic					es with midas)	
I hereby certify that original copies of all document	s submitted were si	ighted by me,	, and the app	olication was c	luly completed.	
Name of Receiving Officer. Signature & Date Branch Telephone number						
×						×_
	edgementCusto					
Pen Na	ame of Customer					
Det de la companya de		ayment deta	<u>ils.</u>	De als Day		
Bank Account Number Bank N	ame			Bank Bra	anch	
APPLICATION CHECK LIST						
Separation letter	A passport p]
Letter from ex-employer on accrued	Proof of enr	rollment with	LPPFA			
Document validating bank details	·			-		4
Age declaration/birth certificate Copy of valid international passport	· · · · ·					-
Copy of valid international passport	I					
		•••••				
Name of Receiving Officer. Signature			ranch Teleph		·	
Dear Customer, kindly ensure to collect and kee				e. For further	enquiries, plea	ise
contact We shall also update you on the progress of you	us on 01-2800800 o			+II novment	of your henefit	
				thi payment	of your benefit	
Leadway Pensure PFA is strongly committed to protectin	Privacy Statement - (og your privacy. The inf			collected from	you primarily to ma	ke for easier and more
rewarding administrative purposes. You have the right to filling this form, you agree that the information you pro	o give and also withdra	aw your consent	t to the collect	tion and process	ing of your informat	ion at any time. By
pensure.com/privacv/."	Alle call be used for an	le staten purpo.	Ses. For furthe		lease visit inceps., ,	eduway-