

# Withdrawal Form



**Don't forget to enclose:**

**A copy of your valid passport or driving licence.**

**A copy of a current utility bill or bank statement if your address has changed within the last 12 months.**

**Before you complete your withdrawal, please see the back of this page for a summary of the options available to you. If you have any questions please talk to your Financial Adviser or call our Customer Service Centre on 01 704 1010.**

Reason for considering Withdrawal:

- 1 Specific need for money ☐ 2 Investment performance ☐ 3 My circumstances have changed ☐ 4 Plan matured ☐

Irish Life Plan No:

Customer First Name:

Customer Surname:

Current Address:

(If you reside outside the Republic of Ireland, please turn overleaf for Non-Resident requirements.)

Mobile Phone No:

(In case we need to contact you regarding your claim)

Email Address:

**Joint Owner:**

Customer First Name:

Customer Surname:

Mobile Phone No:

(In case we need to contact you regarding your claim)

Email Address:

**Please tell us what action you would like to take.**

1. I wish to withdraw (specify amount) €  from my plan
2. I wish to withdraw all my savings ☐ Tick if required
3. I wish to reinvest (specify amount) €  into new plan number

**If regular premium please tick your preferred option.**

1. I wish to continue contributing to my plan ☐ 2. I wish to stop contributing to my plan ☐

\*Please note if you do not specify a preferred option we will continue with your regular contributions.

**For the quickest and safest way to receive your payment, please provide us with your bank details below.**

Bank Sort Code:

Bank Account Number:

Account Name:

Bank Name & Address:

I/We have completed the above withdrawal instructions and wish to proceed with this request:

Your signature:

Date:  /  /

Joint signature:

(if applicable)

Plan owner's signature:

(if different)

Financial Adviser's signature

(if present):

**For the quickest way to send this form to Irish Life, please fax it to 01 2422907 or email a scanned copy to [withdrawals@irishlife.ie](mailto:withdrawals@irishlife.ie). Alternatively you can post it to Irish Life, Lower Abbey Street, Dublin 1.**

## Different Options

Reason for considering withdrawal	Available Options	What do I need to do
1. Specific need for money.	Withdraw what you need and continue regular payments* *will depend on your plan type	Complete form overleaf.
2. Investment performance.	You may have the option to switch funds, most plans give a range of other fund options (including lower risk options).	You should speak with your Financial Adviser before you take any action.
3. My circumstances have changed.	Reduce regular payment* Take a Payment Holiday* *will depend on your plan type	Talk to your Financial Adviser. Confirm intention in writing. Confirm duration of holiday in writing.
4. Plan matured.	Talk to your Financial Adviser or call our Customer Service Centre on 01 704 1010.	

## Withdrawal Checklist

1. I have enclosed my utility bill/ bank statement dated within the last six months. ☐
2. If the premium has been paid by a third party I have enclosed ID documentation and address verification for the third party and myself. ☐
3. If the payment is being made to a third party I have enclosed ID documentation and address verification for the third party and myself. ☐
4. I have included my bank account details so my withdrawal can be paid directly to my bank account ☐
5. I have enclosed a copy of my current Passport/Drivers Licence ☐
6. I have enclosed a copy of my Marriage Certificate if female surname has changed since starting the plan ☐
7. If the plan is assigned, I have enclosed a Deed of Release or signed request from assignee (see note below) ☐
8. If the plan is in trust, I have enclosed a signed request from all trustees ☐

**Please note:** It will take up to 5 working days for you to receive payment after we receive all completed documents.

## Important Points to Note

### 1. Plan Benefits

- If you withdraw savings from a plan which gives you protection benefits, such as life or specified illness cover, your protection benefits will go down (for a joint/dual life plan, your benefits will go down for both lives covered). The reduction will depend on the value remaining in the plan, your current age, your current payment amounts and the level of cover you currently have.

### 2. Plan Value

- The value of your plan will be based on the date we receive all completed documentation into our Head Office in Dublin.

### 3. Exit Tax that may apply to your withdrawal

- Exit tax is an Irish tax payable on any profit made on a life assurance plan. Where the tax applies on your withdrawal, Irish Life is obliged to deduct this tax and pay it to the Irish Revenue Commissioners. We will write to you following your withdrawal and include details of any exit tax that has been deducted. For more info, please visit [www.revenue.ie](http://www.revenue.ie)

### 4. Non-Resident Requirements

- Complete and submit original "Declaration of Residence outside Ireland" form (We cannot accept this by fax). Please contact a member of our Customer Service team on 353 1 704 1010 for a copy of this form.
- A recent utility bill (last three months). This must be in both customer names if it's a joint life plan. Otherwise, we require a separate bill for each plan owner. Due to Revenue rules, withdrawals to non-residents must be paid by cheque and sent to the non-resident address.

### 5. Assignments / Trusts

- If your plan is assigned we will require a Deed of Release or a signed consent from the assignees confirming they are agreeable to this withdrawal request along with the original Deed of Assignment.
- If your plan is in trust we will require a signed request from all trustees confirming they are agreeable to this withdrawal request.

### 6. Joint Life Plans

- If your plan is in joint names, your payment will be issued in joint names unless requested by both plan owners.

### 7. Copy of Identification

To help speed up your claim please enclose a copy of your current Passport/Drivers Licence as this may be needed if your style of signature has changed since taking out this plan. Please write your plan number on each attached document.



**Irish Life**

**Mail:** Irish Life, Lower Abbey Street, Dublin 1, Ireland.

**Telephone:** 01 704 1010 **Fax:** 01 242 2907 **Web:** [www.irishlife.ie](http://www.irishlife.ie) **Email:** [withdrawals@irishlife.ie](mailto:withdrawals@irishlife.ie)