

# Complete Solutions Personal Retirement Savings Account

**Customer Application Booklet** 

### Personal Retirement Savings Account

#### **Product Selection**

Please sele	ect which product you require
Complete	Solutions PRSA Standard plan
The Comp	lete Solutions PRSA Standard product is an approved Standard PRSA contract as defined under Section 91 of the Pensions Act, 1990 as amended.
How many	PRSA Standard plans do you wish to set up? (1 to 10)
Complete	Solutions PRSA Options plan
	lete Solutions PRSA Options product is an approved PRSA contract, as defined under Section 91 of the Pensions Act, 1990 as amended.
How many	PRSA Options plans do you wish to set up? (1 to 10)
Customer C	ionsents
I declare t	hat I consent to Irish Life Assurance plc (the company)
	ection Consents
	ssing and holding (online or otherwise) all information disclosed by me, or on my behalf, including personal data for the sees of issuing and administering all aspects of the plan.
by lav give h	osing my personal data to persons necessary in connection with the above purposes, to regulatory authorities or as required v, to other companies in the Irish Life Group and to any person to whom the plan may be assigned. We will use this information you nere to process your application. You have the right to access, update and rectify your personal details by writing to the Customer the Team at Irish Life, Lower Abbey Street, Dublin 1.
Personal De	etails (please complete in BLOCK CAPITALS)
Last name	First name
Date of Bir	th dd/mm//yyyy Gender Male Female
Financial A	Adviser Code
Additional I	nformation
If Yes, You will be Q2 and 3 t	nu intend to use your PRSA for Additional Voluntary Contributions (AVCs) to an occupational pension scheme?  Yes  No  No  Awhen did you start this employment?  A saked more information about your current scheme. Please also read 'Notes on on-line application' regarding AVCs.  To be completed if your adviser is an Irish Life Financial Adviser, or is a tied agent of Irish Life.  Intend paying AVCs, is the Supplementary Factfind for members of Occupational Pension Schemes completed?  Yes  No
Business	Replacement
	this proposal replace or partially replace another policy (with us or any other company) which has been cancelled or reduced? Yes No is answered <b>Yes</b> , please complete a Business Replacement Summary Form.
Declaration	under Article 3(5) of Personal Retirement Savings Accounts (Disclosure) Regulations 2002
special care	G pose to enter into your PRSA contract(s) in complete or partial replacement of an existing PRSA contract or a retirement annuity contract, please take to satisfy yourself that this PRSA contract(s) meets your needs. In particular, please make sure that you are aware of the financial consequences of your existing PRSA contract or retirement annuity contract. If you are in doubt about this, please contact your PRSA provider.
I hereby de been provi	on of PRSA provider or intermediary eclare that in accordance with Article 3 of the Personal Retirement Savings Accounts (Disclosure) Regulations 2002, a Preliminary Disclosure Certificate has ded to  * and that I have advised the person concerned as to the financial consequences of replacing an SA contract by cancellation or deduction and of possible financial loss as a result of such a replacement. * Insert name of person concerned
Signad	X Date dd/mm/VVVVV
Signed	Name of PRSA provider or Intermediary
Have you	received your Consumer Protection Code PRSA Leaflet?
	ion of person or contributor
	that I have received in writing the information specified in the above declaration.
	X Date dd/mm//y/y/y/
Signed	Name of client

#### Personal Retirement Savings Account

#### Declaration to Irish Life

Proposal Numbers	/	/	/	/	/	/	/	/	/
declare that all the answenave accepted my applica	, ,	estions in my	online applic	ation form are	e true and cor	rect. I unders	tand that this	contract(s) w	ill not start until you
understand that units wil being surrendered, comm	•		•		• •				) shall not be capable
agree that where I have Strategy (ARF), I am pro			• • •				0,	•	Default Investment
agree that Irish Life may good give Irish Life this inform	_	in respect of	any transfer	value contrib	ution amount	from the tran	sferring Truste	ees/Life Offic	ce and I authorise the
Where applicable, I, as an rom my salary. I also undo ny employer making the r	erstand that the	e commencer	nent date of t	O	, , ,				, ·
Where I am paying addition scheme, Irish Life is oblige Benefits under this PRSA r	d to pay out th	e fund in line	with the maxi	mum benefits	s allowed by t	he Revenue C	ommissioners	(if still used	as an AVC at that time
must notify Irish Life if I lo decreases significantly or i		•	•			. , .	o that scheme	or my salary	
Signature							Date	dd/	mm / y y y

# SEPA Direct Debit Mandate Irish Life

This direct debit mandate should be completed by the customer where contributions are to be paid regularly from their own bank

It should not be completed by the employer, or where deductions are made from the customer's salary before tax.

\* Signature(s)

X

Please complete all the fields below marked * and return this mandate to the Creditor														
UMR														
Creditor Identifier	I E 3 0 Z Z Z 3 0 3 5 8	3 7												
Name and address of the payer:														
* Debtor Name														
Debtor Address														
* Debtor Bank Identifier Code (B	BIC)													
* IBAN														
(Account Number)														
Type of payment	Recurrent or One Off Payment													
Creditor's name and address	I R I S H L I F E A S S U R A N C E P L C													
	LOWER ABBEY STREET													
	DUBLIN 1													
By signing this mandate form, you authorise (A) Irish Life to send instructions to your bank to debit your account and (B) your bank to														

debit your account in accordance with the instruction from Irish Life. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on

\* Date of signing ddd/mm//yy

which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

		For Irish Life Inf	formation purposes only																				
		Plan Number (max 18	characters)																				
Ø.		Person(s) on whose be payment is being made																			H		
Please sign and	d date	Direct Debit collecti	on date		of	the n	nonth (	(1st to	28th	only	)			'			'						
		Payment frequency		Mon	nthly			Qu	arterly	y (			H	lalf \	early	, (			Ye	arly			
Non	ctanda	ard Personal Re	tiromon	t Car	ina	·		m+															
INOII			uremen	l Jav	virig	,5 A	LCOU	IIL															
		OMPLETED BY THE VEI Consumer to whom a not											LOCK	CAI	PITAL	. LET	TERS	5)					
	Name of a) I dec that t b) I dec c) I dec	Non-Standard PRSA of Non-Standard PRSA I lare that I have explained the charges may be higher lare that in my opinion it lare that in my opinion the	Product Produc	oducer sumer the vestme t interest dard PR	r: hat the ent risk est of th	Ir ere are ss are g ne abo	ish Life differe greater f	Assura nces be for this ed con	nce plo etweer non-St sumer	c. n a No tanda to pu	on-Staird PRS	ndard 5A. e this r	non-St	anda	rd PR	SA.							
		umer from among all thos of Salesperson:		to prov	ide.																		
		Salesperson (in block cap																					
	Position I		itais).																				
		Regulated Entity:																					
		ompletion of the declarati	ion:		/ m	m /	VV	VV															
							J J																
Irish		RSA Payroll Dec																					
Fields marked with  must be completed	Importar confirmat	mpleted by the Employent: Completion of this formation from Irish Life. The Pany details (please	m signifies th RSA will be s	hat the o	deduc /modi	tions of	describe reflect	ed have these p	alread	dy be	en (or	will be				by th	ne Er	mploy	/er wi	thou	t furthe	er	
	Name	arry details (prease																		П			
	Address																+		+	Н			
-	71001033																<u> </u>		+	$\Box$			
Employers tax reference	>Employer	rs tax reference number		+		_																	
number should contain 7 digits	' '	yee details (please	complete	e in B	LOC	K C	⊥ APIT <i>A</i>	ALS)															
and 1 or 2 letters		Employee																					
		e payroll number		$\pm$															$\pm$	П			
		PRSA number		$\exists \exists$						NB:	PRSAs	only ple	ease - r	no oth	er pol	icy typ	oes ai	re pay	able b	y pay	roll dedu	uction	
L	_					1														Not	.e		
	Type o	of change	If regular o	If regular contribution:				oaid by	•	-	€										Cheques for single contributions		
								To be paid by Employee												pay	should be made payable to "Irish Life		
							Total					€								con	tribution		
				per week per fortnight per month											be paid by direct debit.								
_	Type o	f change	If one-off	single o	contrik	oution:	: Em	ployer	€						Emp	oloyee	e [ =	€					
	Effectiv	ve payroll date	Date on w	vhich p	ayroll	deduc	tions ar	e to tak	e effe	ct d	d	mlı	m /	у	у	у		e mon				of payroll	
	Payroll	administrator deta	ails														Irish	Life PF	RSA plai	ıns will	sted chan I be proce		
	Signed		Ø X																		will take o		
			Signature of person duly authorised to sign for and on behalf of the employer.																				
		ohone number		$\frac{\perp}{\perp}$										<u> </u>		<u> </u>			+	屵			
	Email add	dress																					

# Notes on the online application

#### Eligibility

You must be an Irish resident for tax purposes. Your self-employment, employment, or occupation must be liable to tax under schedule D or E in the Republic of Ireland in order to claim tax relief on premiums paid into this PRSA.

You may be able to take out a PRSA AVC if you are a member of an occupational pension scheme with your employer. Please talk to your financial adviser.

#### Proof of age

We require evidence of age in all cases. This can be your birth certificate, passport or driving license. If your surname has changed, we require evidence of your change of name (for example marriage certificate, deed poll etc.)

## Proof of Personal Public Service Number (PPSN)

We require confirmation of your PPSN to ensure that we can fulfil our reporting requirements with the Pensions Board and the Revenue Commissioners.

#### Automatic increase of contributions

Contributions will increase in line with inflation or a rate set by Irish Life (at present 5%) whichever is higher. This facility is not available in cases where contributions are paid through payroll deduction. Any extra increases in contributions required must be applied for separately.

#### Transfer Values

A transfer application form must be completed by the life office/trustee transferring the assets and submitted with this application form.

#### **Fund restrictions**

Transfers out of the Capital Protection Fund may have a Market Value Adjuster applied. This would not be applied if you retire on the plan maturity date or in certain other circumstances. More information is available from your financial adviser.

#### Payroll Deduction Authority

If contributions are being deducted by your employer from your salary before tax, please ensure the Irish Life Payroll Deduction Authority in this booklet is completed by your employer and remitted with this application form. Where contributions are deducted from your salary, the effective date of this PRSA plan will be the month following the month of first payroll deduction.

Your employer can take contributions from your salary whenever you are paid. This could be every week, fortnight or month. We will then take this contribution from your employer's bank account. Please note that your plan will be monthly-paid and we will collect contributions from your employer every month.

For example, if you are paid weekly and decide to make regular contributions of €60, we multiply €60 by 52 (weeks in a year) and divide it by 12 (months in a year). Your plan will then be set up for €260 every month and we will collect this from your employer's bank account every month by direct debit.

Therefore, at certain times, deductions made from your payroll may be held in your employer's bank account for a short-period before they are sent to us and invested in your plan. Contributions are invested on the day we receive them.

#### Default Investment Strategy (Annuity)

If you choose the Default Investment Strategy (Annuity) you will initially be invested in the Consensus Equity Fund until you are 15 years away from your chosen retirement date. Your fund and future contributions will then be moved into the Consensus Fund. If you have less than 15 years to go to retirement when you take out this PRSA your contributions will be invested initially in the Consensus Fund.

When you are 5 years away from your chosen retirement date your fund will gradually be switched into the Pension Protection Fund and Cash Fund. Please see your product booklet for full details.

#### Default Investment Strategy (ARF)

If you choose the Default Investment Strategy (ARF) your investment fund will initially be invested in the Consensus Equity Fund until you are fifteen years from your chosen retirement date. At this date your investment funds will automatically be switched into the Consensus Fund until your chosen retirement date. Please see your product booklet for full details.

#### **Annuity Lifestyle Option**

If you choose the Annuity Lifestyle Option you must choose which investment funds you want to be invested in initially. When you are five years from your chosen retirement date we will switch your fund and future contributions into the Consensus Fund. We will gradually switch your fund and future contributions into the Pension Protection Fund and the Cash Fund. Please see your product booklet for full details.

#### **ARF Lifestyle Option**

If you choose the ARF Lifestyle Option you must choose which investment funds you want to be invested in initially. When you are within 5 years from your chosen of retirement age you will automatically be switched into the Consensus Fund until your chosen retirement date. Please see your product booklet for full details.

## If you intend to pay Additional Voluntary Contributions

If you are a member of a defined benefit Occupational Pension Scheme, this application is not suitable. You will be required to complete a different form. Please also note that we can only accept AVCs linked to Defined Benefit Schemes if your financial adviser is an independent intermediary. We do not accept such AVCs where your adviser is an Irish Life Adviser or is a tied agent of Irish Life.



#### Contact us:

Write to us: Lower Abbey Street, Dublin 1, Ireland

Phone us: 01 704 1404

Fax us: 01 704 1900

Website: www.irishlife.i

Email us: customerservice@irishlife.ie