

**PLEASE NOTE: IF ANY OF THESE DETAILS ARE MISSING, INVESTMENT WILL BE GIVEN ON
DATE FINAL REQUIREMENT RECEIVED.**

Company Pension Quality Checklist

Seller Code: _____

LARC No: _____

- | | | |
|---|-----|----|
| • Product choice: | YES | NO |
| • Personal Details: | YES | NO |
| • Marital Status: | YES | NO |
| • Occupation: | YES | NO |
| • PPS Number: | YES | NO |
| • Employer Name and Address: | YES | NO |
| • Retirement age: | YES | NO |
| • Contribution and payment details: | YES | NO |
| • Employer / Employee premium split: | YES | NO |
| • Letter of exchange signed and dated: | YES | NO |
| • Fund choice: | YES | NO |
| • Salary: | YES | NO |
| • Date employment commenced: | YES | NO |
| • Employer and Employee tax districts: | YES | NO |
| • Employer Tax reference number: | YES | NO |
| • Is client 20% Director: | YES | NO |
| • Employer Declaration signed and dated: | YES | NO |
| • If Pension Term Assurance Section 13: | YES | NO |
| • Medical Questions:
(if Term Assurance of Contribution cover) | YES | NO |
| • Medical declaration signed and dated: | YES | NO |
| • Completed Direct Debit Mandate | YES | NO |
| • Commission choice: | YES | NO |
| • Is this replacing Irish Life Business? | YES | NO |
| • If yes, has the Irish Life plan number being replaced been noted on the proposal or Epos: | YES | NO |

Details of previous pensions

1. Does client have pension plan in respect of current employment?

If Yes, please answer the following questions:

- If Defined Contribution, what is current value? _____
- Total EE, ER and AVC contributions to plan year to date: _____
- If Defined Benefit, do we have details of the scheme? _____
- Total EE, ER and AVC contributions to plan year to date: _____

2. Does client have a PRSA AVC?

- Is this in respect of previous or current employment? _____
- If current employment please answer the following questions:
 - Current value? _____
 - Total contribution to plan year to date? _____
- If previous employment please answer the following questions:
 - Current value? _____
 - PRSA Provider? _____

3. Does client have pension plan in respect of previous employment? _____

If Yes, please answer the following questions:

If Defined Contribution:

- What is current value? _____
- What is NRA? _____
- Scheme Name: _____

If Defined Benefit:

- What is NRA? _____
- Details of entitlement from scheme: _____
- Scheme Name: _____

4. Does client have a Personal Pension or PRSA? _____

If Yes, please answer the following questions:

If Personal Pension:

- What is current value? _____
- Life Office? _____

If PRSA:

- What is current value? _____
- PRSA Provider? _____

These are the current requirements and are subject to change – we reserve the right to ask for further requirements