Complete Solutions PRSA

Supplementary Application Form

This form is to be completed along with the regular Complete Solutions PRSA Application form if you are setting up more than one PRSA and where the details for each PRSA are different (for example fund choice and contribution amounts). Please attach both these forms when you are sending them to Irish Life. The maximum number of PRSAs you can take out using this supplementary application form is 9.

1. FINANCIAL ADVISER	() [[()]							
Financial adviser name								
Financial adviser code Please note: All PRSAs will be set up on the same profile(s) as stated in the main PRSA application form unless we are told otherwise.								
2. PERSONAL DETAILS								
Title (Mr/Mrs/Ms)		First Name						
Date of Birth	/ mm / y y y	y Surname						
		PRSA 2	PRSA 3	PRSA 4	PRSA 5			
Proposal number								
CS PRSA Standard (Please tick)								
CS PRSA Options (Please tick)								
Regular contributions	Employee	€	€	€	€			
	Employer	€	€	€	€			
On what date are your contribu	utions to start?	dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy			
How often do you wish to mak	e contributions?	Monthly Quarterly	Monthly Quarterly	Monthly Quarterly	Monthly Quarterly			
		Half Yearly Yearly	Half Yearly Yearly	Half Yearly Yearly	Half Yearly Yearly			
Do you want your contributions to increase in line with inflation? (indexation is not available for payroll deduction cases)		Yes No	Yes No	Yes No	Yes No			
Lump Sum Contribution	Employee	€	€	€	€			
	Employer	€	€	€	€			
Transfer value		€	€	€	€			
Fund options: - you should refer to your main application and product booklet for an explanation of these terms								
Default Investment Strategy (Annuity)		Yes No	Yes No	Yes No	Yes () No ()			
2. Default Investment Strategy (ARF)								
2. Default investment strategy	(ARF)	Yes No	Yes No	Yes No	Yes No			
Annuity Lifestyle Option (insert fund choice in (5) bel		Yes No Yes No	Yes No Yes No	Yes No No				
Annuity Lifestyle Option	ow)				Yes No			
3. Annuity Lifestyle Option (insert fund choice in (5) bel4. ARF Lifestyle Option	ow)	Yes No	Yes No	Yes No	Yes No			
3. Annuity Lifestyle Option (insert fund choice in (5) bel4. ARF Lifestyle Option (insert fund choice in (5) be	ow)	Yes No Yes No	Yes No Yes No	Yes No	Yes No Yes No			
3. Annuity Lifestyle Option (insert fund choice in (5) bel4. ARF Lifestyle Option (insert fund choice in (5) be	ow)	Yes No Yes No %	Yes No Yes No %	Yes No Yes No %	Yes No Yes No %			
3. Annuity Lifestyle Option (insert fund choice in (5) bel4. ARF Lifestyle Option (insert fund choice in (5) be	ow) :low) ibutions/transfers wi	Yes No Yes No % Yes No % % % % % Il be invested as above. If	Yes No Yes No %	Yes No Yes No %	Yes No Yes No Yes No % % %			
 Annuity Lifestyle Option (insert fund choice in (5) bel ARF Lifestyle Option (insert fund choice in (5) be My fund choice: 	ow) :low) ibutions/transfers wi	Yes No Yes No % Yes No % % % % % Il be invested as above. If	Yes No Yes No %	Yes No Yes No %	Yes No Yes No Yes No % % %			
 Annuity Lifestyle Option (insert fund choice in (5) bel) ARF Lifestyle Option (insert fund choice in (5) be) My fund choice: All regular and lump sum contributions, plean	ow) :low) ibutions/transfers wi	Yes No Yes No Wes No	Yes No Yes No % % % you would like lump sum of	Yes No Yes No % Yes No % % % contributions/transfers to	Yes No Yes No Yes No When When When When When When When When			
 Annuity Lifestyle Option (insert fund choice in (5) bel) ARF Lifestyle Option (insert fund choice in (5) be) My fund choice: All regular and lump sum contributions, please Fund name and %	ow) :low) ibutions/transfers wi	Yes No Yes No Yes No % % % If be invested as above. If the choice below?	Yes No Yes No Yes No % % % you would like lump sum of %	Yes No Yes No % Yes No % % % contributions/transfers to	Yes No Yes No Yes No Yes No % % % be invested differently %			

	PRSA 6	PRSA 7	PRSA 8	PRSA 9	PRSA 10			
Proposal number								
CS PRSA Standard (Please tick)								
CS PRSA Options (Please tick)								
Regular contributions								
Employee	€	€	€	€	€			
Employer	€	€	€	€	€			
On what date are your contributions to start?	dd / mm / yyyy	dd/mm/yyyy	dd/mm/yyyy	dd / mm / yyyy	dd/mm/yyyy			
How often do you wish to make contributions?	Monthly Quarterly	Monthly Quarterly	Monthly Quarterly	Monthly Quarterly	Monthly Quarterly			
	Half Yearly Yearly	Half Yearly Yearly	Half Yearly Yearly	Half Yearly Yearly	Half Yearly Yearly			
Do you want your contributions to increase in line with inflation? (indexation is not available for payroll deduction cases)	Yes No	Yes No	Yes No	Yes No	Yes No			
Lump Sum Contribution								
Employee	€	€	€	€	€			
Employer	€	€	€	€	€			
Transfer value	€	€	€	€	€			
Fund options: - you sho 1. Default Investment Strategy (Annuity)	ould refer to your main ap	Polication and product boo	klet for an explanation of Yes No	Yes No	Yes No			
Default Investment Strategy (ARF)	Yes No	Yes No	Yes No	Yes No	Yes No			
Annuity Lifestyle Option (insert fund choice in (5) below)	Yes No	Yes No	Yes No	Yes No	Yes No			
4. ARF Lifestyle Option (insert fund choice in (5) below)	Yes No	Yes No	Yes No	Yes No	Yes No			
5. My fund choice:	%	%	%	%	%			
	%	%	%	%	%			
	%	%	%	%	%			
	%	%	%	%	%			
All regular and lump sum contributions/transfers will be invested as above. If you would like lump sum contributions/transfers to be invested differently than regular contributions, please indicate your fund choice below?								
Fund name and %	%	%	%	%	%			
Fund name and %	%	%	%	%	%			
Fund name and %	%	%	%	%	%			
Fund name and %	%	%	%	%	%			
Fund name and %	%	%	%	%	%			
3. DECLARATION This supplementary application is linked to my main application. The signed declaration within that application								

applies to this form also.

Customer signature

Lower Abbey Street Dublin 1 Ireland T: 01 704 2000 F: 01 704 1900



Date