Company to Company Pension Transfer – Additional Information from trustees / Life Office

To:

Revenue Reference Number

Pensions New Business, Loc52 Irish Life Assurance plc Lower Abbey Street Dublin 1 Member Name: Member Date of Birth: _____ / _____ / _____ Irish Life Reference number: Is the scheme an approved scheme under Finance Yes No \square Act 1972 or Chapter 1, Part 30 of the Taxes Consolidation Act 1997? € Total value of assets being transferred Value representing (a) Employer Contributions € (b) Employee Contributions € € (c) AVCs Name of transferring pension scheme: Name & address of trustee(s): Date of Joining Service Is member a 20% Director Yes 🗖 No \square Is member a 5% Director Yes \square No \square Is scheme Revenue Approved Yes No \square

Are the total assets relating to this member being transferred?	Yes □ No □
	Must be answered Yes
Is the transfer from a self-administered scheme?	Yes No
Does any of this transfer value relate to service with a previous employer?	Yes No
If Yes, please provide the following details from the previous employment:	
Date of Joining Service	
Date of Leaving Service	
Final Salary Details	
Has a Pension Adjustment Order (PAO) or other court order granting part of the benefits to the member's spouse been made on the benefits under the existing pension arrangement?	Yes No
If yes we may required additional information.	
Has the member left this employment, or left pensionable service in respect of this employment?	Yes No
Additional Information required if the member has	left service:
Date of Leaving Service	
Final Salary Details	
(For 20% Directors please provide remuneration details for at least 3 consecutive years ending not earlier than 10 years before the date of leaving service)	
Retirement Lump Sum Benefit Entitlement at retirement if value had remained in the transferring scheme?	€
Are you satisfied that the member's benefits have not exceeded the limits set down by the Revenue Commissioners?	Yes No
Signed: Date:	//
Position:	