

Company Pension Transfer – Trustee Declaration

Return To:

Pensions New Business, Loc52

Irish Life Assurance plc Lower Abbey Street Dublin 1	
Member Na	ame
Member Da	ate of Birth dd / mm / yyyy
Receiving S	Scheme Name
Irish Life Ro	eference Number
Transferrin	g Plan Type (e.g. PRSA, Company Pension, Buy Out Bond)
Name of Transferring Scheme (if applicable)	
Name and address of transferring pension scheme / life office	
I / we the trustees of the receiving occupational pension scheme acknowledge the member's transfer request and confirm the receiving pension scheme can accept the transfer value.	
Signature	Trustee authorised to sign of behalf of the receiving scheme
Name	Tradice datheriod to digit of bottom of the receiving seneme
inailie	(in block capitals)
Date	d d / m m / y y y y