

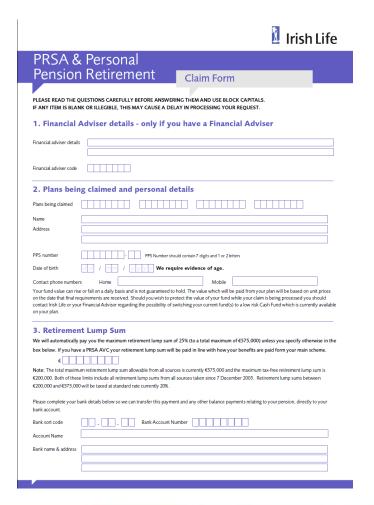
Personal Pensions Submission Requirements

Annuity Route



- Send to Pension Claims if funds are being claimed from an Irish Life
 Retail Plan
 - Personal & PRSA Retirement Claim form
 - Annuity Application form
 - Evidence of age original or legible certified copy of the member's birth cert or passport
 - Marriage Certificate if applicable
- WWW.bline.ie/pensions/retirement-claims-information

Claim Form (Key requirements)





Evidence of Age

Marriage Cert if applicable

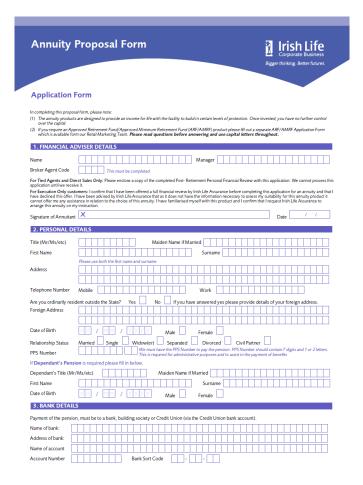
Option Chosen

Bank Details for payment of lump sum

Full details of other pension Benefits – inforce & previously drawn down

Signed & Dated

Annuity App Form (Key requirements)





Evidence of Age

Marriage Cert if applicable

Quote if applicable (rates Are guaranteed for 14 days -Copy of the quote required)

Signed & Dated

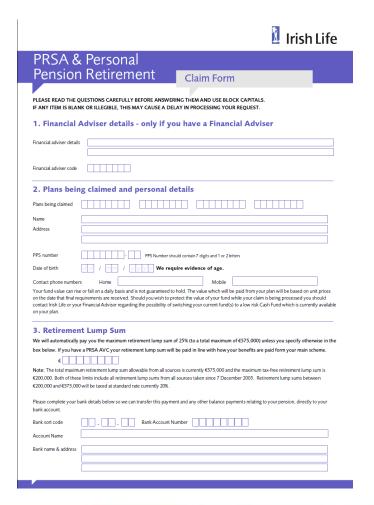
Commission – if non Standard. Default is 2%.

A(M)RF Route



- Send to Pension Claims if funds are being claimed from an Irish Life
 Retail Plan
 - PRSA & Personal Pension Retirement Claim form
 - A(M)RF application form
 - Evidence of age original or legible certified copy of the member's birth cert or passport
 - Proof, by pay or remittance slip, of guaranteed pension income, where this income is greater than €12,700 p.a
- <u>WWW.bline.ie/pensions/retirement-claims-information</u>

Claim Form (Key requirements)





Evidence of Age

Marriage Cert if applicable

Option Chosen

Bank Details for payment of lump sum

Full details of other pension Benefits – inforce & previously drawn down

Signed & Dated

A(M)RF Form (Key requirements)



	IRF E ITSTILLIE
Application	Form - Brokerage
ARF/AMRF products at fund. However, depend will last for your lifetime PLEASE READ THE Q	oposal form please note: re designed to allow you to control your pension fund and you can determine the rate at which you take withdrawals from the lings on the investment return. The rate of withdrawals and how long you like in retirement, there is no guarantee that the fund is defined to completing this application form please ensure you have read and understood the product booklet. UNESTINDS CASEFULTY SEFORE ANYWERTING THEM AND USE BLOCK CASTITALS. IK OR ILLEGIBLE, THIS WILL CAUSE A DELAY IN PROCESSING YOUR APPLICATION.
1. FINANCIAL AD	VISER DETAILS
Financial adviser name	
Financial adviser code	
2. PROFILE NUME	BER
Lump sum	If this section is left blank this will delay us processing your application.
3. PERSONAL DE	
Title (Mr/Mrs/Ms)	First Name
Initial (if applicable)	Surname
	Previous Surname (if any)
Home address	
Country of residence	
Date of Birth	Male O Female O
Relationship Status	Single Married Separated Divorced Widowed Registered Civil Partner
E-mail address (if applic	
Contact Phone Number PPS Number	s Home Mobile PPS Number should contain 7 digits and 1 or 2 letters
Occupation you are reti	ring from
Current occupation	
4. CONTRIBUTIO	N DETAILS
	of Investment Certificate (available at www.bline.ie) must be completed by the Insurance Company, QFM, PRSA
provider or Trustee(s)	or investment, certificate (available at www.clinie.e) must be completed by the insurance company, QPM, PLOS transferring the money. Please sublinit a Source of Investment Certificate for completion direct to the relevant ith their completed claim documentation.
	Total Fund €
	Retirement lump sum €
Complete Solutions AN	IRF1 € Complete Solutions AMRF 2 €

Commission Profile

Product Choice

Eligibility Evidence if ARF

IIF form if investing in SIF

Signed & Dated

Source of Inv Cert if funds coming from a non IL Retail PRSA.

