

## Company Pension Top Up Form Brokerage

Before you give us your personal information it is important that you know what your data protections rights are and how and why your personal information is used. This is set out in our Irish Life Data Privacy Notice which is always available on our website at <a href="https://www.irishlife.ie/privacy-notices/">https://www.irishlife.ie/privacy-notices/</a> or you can ask us for a copy. If you are a member of the Irish Life Retail Master Trust, the Trustee's Data Privacy Notice is also available at <a href="https://www.irishlife.ie/retail-master-trust">https://www.irishlife.ie/retail-master-trust</a>.

Please read the Sections carefully before completing them and use BLOCK CAPITALS.

If any section is blank or illegible, this may result in a delay in processing your request.



#### This form must be completed for top ups into an existing Irish Life company pension schemes

#### 1. Financial Adviser Details

Financial Adviser Name

Financial Adviser Code

Profile Number Regular Contribution

Profile Number Single Contribution

#### 2. Plan Details

Member Name

Plan number

Current Employer Name

#### 3. Top Up Details

Regular Contributions	New Contribution	
Employer Contribution	€	per
AVC Contribution	€	per
Employee Contribution	€	per

On what date is the regular contribution increase to start

#### ote: Single Contributions

Employer Contribution	€
AVC Contribution	€

Single contributions can be paid by cheque from the Company's account or by electronic fund transfer (EFT). For more information on EFT payments see the Help Centre on www.irishlife.ie

**Please Note:** Regular contributions will be deducted as

per existing regular contributions.

Please include a recent payslip, P60 or a copy of your Employment Detail Summary pdf from Revenue's myAccount.

Questions 4.(b) to 4.(d) and 5.(a) are to ensure your company pension benefits are within overall Revenue maximum limits

If this information is not provided we will run the maximum funding check using the strict scale, however we may require further information before this top up can be processed.

#### 4. Employment and Pension Details from current employment

a. Current annual Schedule E salary
b. Current employer contributions to other pensions for this employment
c. Current employee contributions as well as any AVC or PRSA AVC contributions to other pensions for this employment
d. Current value of other company pensions, AVC schemes or PRSA AVCs for this employment
e. Current value of other personal pensions and PRSAs for this employment
€

#### 5. Pensions from other employments

- a. Do you have other pensions from previous periods of employment and / or self employment? Yes No
- b. If yes please confirm the current value €

If you need more space or if the member has retirement benefits they have already received or a defined benefit scheme please provide details in the text box below or on a separate sheet.

#### 6. Fund choice

a. I wish to invest all contributions (both existing and top up amount outlined above) in my existing fund(s) choice

#### Or

#### **Regular Contributions**

b. I wish to invest all contributions (both existing and top up amount outlined above) as follows

%	%
%	%
%	%

#### Or

c. Other investment choice as detailed in the box below

#### **Single Contributions**

%	%
%	%
%	%

Please complete the following declaration:

- > Declaration A for one member schemes where the employer acts as trustee.
- > Declaration B For (i) one member schemes where there is a professional trustee in place, or
  - (ii) plans under the Irish Life Retail Master Trust

### Declaration A Trustee Declaration (where the employer acts as trustee)

- > I declare that all the answers to all the questions in this application form are in every respect true and correct.
- Where the scheme rules allow the member to make the investment decision, I acknowledge that I as trustee am responsible for ensuring that the employee (member) has been/will be provided with all information required by relevant pensions legislation and all information necessary to enable him/her to exercise any discretion allowed.

Please sign and date

Signature

(Person authorised to sign for and on behalf of the employer as trustee)

Please be aware for all signatures typed herein, you are electronically certifying this document, just as if you were physically signing on paper.

Name

(in BLOCK CAPITAL letters)

# Declaration B Member and Employer Declarations (where there is a Master Trust or professional trustee in place)

- > I declare that all the answers to the questions in this application form are in every respect true and correct.
- > I declare that I have been provided with the necessary information to make an informed investment decision. I am happy with the investment choice made on this application form (or supplied through any additional documents linked to this application).

Please sign and date

Signature of Member

Please be aware for all signatures typed herein, you are electronically certifying this document, just as if you were physically signing on paper.

Date (dd/mm/yyyy)

I declare that all the answers to the questions in sections 2, 3 and 4 of this application form are in every respect true and correct.

Please sign and date

Signature of Employer

Please be aware for all signatures typed herein, you are electronically certifying this document, just as if you were physically signing on paper.

(Person authorised to sign for and on behalf of the employer)

Date (dd/mm/yyyy)

Name

(in BLOCK CAPITAL letters)