

# TRANSFER BEING MADE TO A PERSONAL RETIREMENT SAVINGS ACCOUNT

This form must be completed every time there is a transfer made to a Personal Retirement Savings Account (PRSA) only. Irish Life Corporate Business can not accept a transfer without this form being completed.

Please complete every item on this form in **BLOCK CAPITALS**. If any item is blank or illegible, this will cause a delay in processing your application.

Before you give us your personal information please note that Irish Life has a Data Privacy Notice. This explains what your data protection rights are and how and why we use your personal information. This is always available on our website at <http://www.irishlifecorporatebusiness.ie> or you can ask us for a copy.



## Section 1: Broker/Consultant/Adviser Details

This section should be completed by broker/consultant/adviser

Adviser Name

## Section 2: Your Details

PRSA Plan Ref. No

Name of your Employer

Title Mr  Mrs  Miss  Ms  Other

First Name  Surname

Please use both the first name and surname in your employee records

Address

Phone Work  Mobile

Email Address

Date of Birth / /  Male  Female

## Section 2: Transfer from PRSA

Leave this section blank if it is not relevant to your transfer.

a) Is this a transfer from another Irish Life PRSA? Yes  No

If yes please provide Member Number

Plan Number

If yes, please confirm type of PRSA Standard PRSA  or Non-Standard PRSA

Or

b) Is this a transfer from another PRSA plan from another provider? Yes  No

If yes, please confirm type of PRSA Standard PRSA  or Non-Standard PRSA  PRSA Plan Number

Please confirm the name of the PRSA

Please confirm name and address of provider

Transfer Amount €

## Section 3: Transfer from a Retirement Annuity Contract (RAC)

Leave this section blank if it is not relevant to your transfer.

Name of RAC

Name and address of provider

Transfer Amount €

## Section 4. Only complete this section for transfers from outside Ireland

Leave this section blank if it is not relevant to your transfer.

Which country is the transfer from?

Reference Number

Name of Pension Plan

Name and address of provider

Transfer Amount Employer Amount €  Employee Amount €  Additional Voluntary Contributions (AVC) €

**Note:** All benefits in respect of this transfer payment will be paid in accordance with Irish Law and revenue practice. We cannot accept a transfer payment if there are additional requirements to Irish Law and revenue practice.

## Section 5. Transfer from a Defined Contribution or a Defined Benefit Pension Plan\*

Leave this section blank if it is not relevant to your transfer.

**Note:** A transfer payment from an occupational or statutory scheme is not allowed where the customer has been a member of that scheme for 15 years or more. This restriction does not apply to Additional Voluntary Contribution - (AVC) only schemes.

A Certificate of Comparison is then required in all cases except:

- i) where the transfer value is less than €10,000 or
- ii) where the transfer represents a return of contributions, or the value of accrued benefits, to a member who has less than 2 years service in that scheme and has no preserved benefits or
- iii) where the scheme is being wound up.

Irish Life Corporate Business does not currently accept transfers where a Certificate of Comparison is required.

a) Is this a transfer from another Irish Life Defined Contribution or Defined Benefit Pension Plan? Yes  No

If yes please provide the Reference Number

Or

b) Is this a transfer from a Defined Contribution or a Defined Benefit Plan from another provider? Yes  No

If yes, please confirm the name of the Pension Plan

Please confirm name and address of provider

How many years are you a member of the above scheme

Transfer Amount Employer Amount €  Employee Amount €  AVC Amount €

## Section 6. To be completed by the Intermediary/Broker/Adviser

I confirm that a Certificate of Comparison is not required in these circumstances

Has the scheme member been given a written statement as to why a transfer is or is not in their interest? Yes  No

Signature of Intermediary  Date  /  /

Name

Address

## Section 7: Politically Exposed Person (PEP) or Relative or Close Associate (RCA) of a PEP

We are obliged under Anti-MoneyLaundering legislation to identify PEPs or RCAs.

Are you a PEP or RCA? Yes  No

### Who is a PEP?

A 'politically exposed person' means any individual, who currently is, or has at any time in the past 12 months, been entrusted with a prominent public function and performs one of the following roles:

- |  | Please tick if appropriate |
|--|----------------------------|
| (a) A member of a parliament/ member of a legislature or equivalent  | <input type="radio"/>      |
| (b) A member of a Supreme Court, Constitutional Court or any other high level judicial body which passes non-appealable verdicts (except in exceptional circumstances) | <input type="radio"/>      |
| (c) A member of a court of auditors or the board of a central bank   | <input type="radio"/>      |
| (d) An ambassador, charge d'affairs or high ranking officer in the armed forces  | <input type="radio"/>      |
| (e) A member of the administrative, management or supervisory body of a state owned enterprise   | <input type="radio"/>      |

### Who is a Relative?

- |   |                       |
|---|-----------------------|
| (a) Any spouse of the PEP   | <input type="radio"/> |
| (b) Any person who is considered to be a common law spouse of the politically exposed person under law                          | <input type="radio"/> |
| (c) A child of the politically exposed person   | <input type="radio"/> |
| (d) Any spouse of the child of a politically exposed person   | <input type="radio"/> |
| (e) Any parent of the politically exposed person  | <input type="radio"/> |
| (f) Any other family member of the politically exposed person who is of a prescribed class set out by the Department of Finance | <input type="radio"/> |

### Who is a Close Associate?

- |   |                       |
|---|-----------------------|
| (a) Any individual who has a joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations with the politically exposed person | <input type="radio"/> |
| (b) Any individual who has a sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the politically exposed person             | <input type="radio"/> |

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## Section 8: Data Privacy Notice and Employee Declaration

### Data Privacy Notice

I confirm I have been informed about the Irish Life Data Privacy Notice and where to find it.

### Employee Declaration

I declare that the answers to the above questions are in every respect true and complete and that this application and declaration shall form the basis of the contracts with Irish Life Assurance plc. I declare that I have applied for membership of a PRSA that is approved under the Pensions Act 1990 and which complies with the provisions of Part 30, Chapter 2A of the Taxes Consolidation Act 1997.

Signature

Date  /  /

Irish Life Assurance plc is regulated by the Central Bank of Ireland.

In the interest of customer service we will monitor calls.  
Irish Life Assurance plc, Registered in Ireland Number 152576, VAT number 9F55923G.

Irish Life Corporate Business, Lower Abbey Street, Dublin 1, Ireland. T: 01 704 2000 • F 01 704 1905

