

## TRANSFER OF BENEFITS

This form should only be used for transfers from previous pension plans to Irish Life Corporate Business Defined Contribution pension plans. **Please complete every item on this form in BLOCK CAPITALS.** If any item is blank or illegible, this will cause a delay in processing the transfer. Irish Life Corporate Business will not release a willing and able letter until this form is fully completed. The information is required in order to process the member's retirement benefits.

Before you give us your personal information it is important that you know what your data protection rights are and how and why we use your personal information. This is set out in the Irish Life Data Privacy Notice which is always available on our website at <https://www.irishlife.ie> or you can ask us for a copy.



### Section 1: Receiving Scheme Details

Scheme Name

Scheme Number

Policy Number

Policyholder Name

Policyholder Date of Birth / /

Occupational Plan Details: Defined Contribution (DC) or

Defined Benefit (DB) or

Personal Retirement Savings Account (PRSA)

### Section 2: Source of Transfer

- a. A company pension Scheme including Additional Voluntary Contributions (AVC) scheme or self-administered scheme
- b. A Personal Retirement Bond (PRB) or Buy Out Bond (BOB)
- c. A Personal Retirement Saving Account (PRSA)
- d. A pension arrangement outside the state

If the transfer value is from an overseas pension please contact Irish Life for specific requirements. Irish Life can not accept transfers for the UK or from pension schemes which have claimed tax relief in the UK on pension contributions as our pensions are not registered as qualifying recognised overseas pension schemes (QROPS) with HM Revenue & Customs.



### Section 3: Scheme and Employment Details (This section is not relevant if you have ticked PRSA above).

Name of the Plan the Transfer is coming from

Is the scheme approved as a Retirement Benefits Scheme for the Purposes of Part 30, Chapter 1, Taxes Consolidation Act, 1997 and is treated as an 'Exempt Approved Scheme' for the purposes of Section 774 of that Act? Yes No

Revenue Reference Number

Pensions Authority Number

Date relevant employment commenced / /

Date member joined the scheme / /

Date relevant employment ceased / /

Normal retirement age

Salary at date of leaving service €

Effective date of last salary / /

Was the member a 20% director? Yes No

If yes, provide salary figures for 3 consecutive years within the last 10 years of employment ceasing €  
€  
€

### Section 3: (Continued).

Has a Revenue maximum funding check been carried out?		Yes	No
Is the member within the limits set by Revenue?		Yes	No
Current value of total fund		€	
Split of transfer value:	Employer	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	
	Member	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	
	Additional Voluntary Contribution (AVC)	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %	
	<b>Total</b>	<b>1 0 0 . 0 0 %</b>	

Note: When the transfer value is sent we require exact split of the final value or it will be returned.

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### Section 4: Waivers and Drawdowns

Has the member waived their right to a future retirement tax free lump sum? If yes, give details		Yes	No
Has an AVC Drawdown been applied to any part of this Transfer Value? If yes, give details		Yes	No
Are there any other restrictions on the benefit paid out? If yes, give details		Yes	No

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### Section 5: Previous Transfers In

Does this transfer amount include an amount in respect of an entitlement from any other former employment?		Yes	No
If yes, provide the amount relating to the former employment contained in the transfer value		€	
Please refer to Section 2 d. Source of Transfer - UK transfers are not permitted.			
The date relevant employment commenced		/	/
The date relevant employment ceased		/	/
Salary at date of leaving service in respect of this former employment		€	

## Section 6: Pension Adjustment Orders

Has a Pension Adjustment Order been made in relation to the benefit being transferred? Yes No

If the answer to the above is 'Yes' please complete the relevant section below:

### 1. The transfer relates to the entire benefit and no previous transfers have been made as a result of the Pension Adjustment Order

- a. Please provide a copy of the Pension Adjustment Order
- b. Please confirm that amount of the transfer to which the non-member spouse is entitled as at the date of transfer €

### 2. The transfer relates to member spouse's benefit only

- a. Please provide a copy of the Pension Adjustment Order
- b. Please provide the following information in relation to the non-member spouse and their benefit:

- i. Name
- ii. Last known address

iii. PPSN (if known)

iv. Where non-member spouse's benefit was transferred to including contract details for the administrator

v. Amount transferred €

vi. Date transferred / /


### 3. The transfer relates to or includes the non-member spouse's benefit only

- a. Please provide a copy of the Pension Adjustment Order
- b. If applicable please provide information as to the amount of the benefit transferred which relates to the Pension Adjustment Order

c. Please confirm the amount of the transfer which relates to the Pension Adjustment Order which can be taken as a lump sum

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## Section 7: Signed by or on Behalf of the Transferring Life Office

 Signature

Date / /

Name in BLOCK CAPITALS

Address

Telephone

Email

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.

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**Irish Life**