PRE - RETIREMENT NOTIFICATION

The above subject refers.

We wish to inform you that from our records, you are due to retire within the next six (6) months.

Kindly complete the attached Retirement Benefit Application form and submit with the pre-requisite documents at our nearest branch office or online via email info@vgpensions.com. You may get more information about the different retirement options from your account officer or through our contact center.

Please note that the processing of your application will commence upon receipt of all your entitlements into your Retirement Savings Account.

Please note that this is a system generated report based on your submitted records (date of birth and date of employment); you may disregard it if your retirement is not due. Also note, it will not affect your records with us in any way.

For additional information, please do not hesitate to call us on any of the following numbers 01-2803550 or send an e-mail to info@vgpensions.com.

While looking forward to making your retirement as comfortable as possible, we thank you once again for choosing Veritas Glanvills Pensions Limited.

Yours faithfully,

FOR: VERITAS GLANVILLS PENSIONS LIMITED

Abiola Sogunle Head, Benefit Administration Abiodun Shode Executive Director



BENEFIT APPLICATION FORM

Affix Recent Passport Photograph

ACCOUNT HOLDER'S PARTICULARS First Name Surname Middle Name PIN D.O.B (dd/mm/yyyy) Sex (M/F) **Marital Status Permanent Home** Address: House Tel. Number Mobile Tel Number 2. CURRENT EMPLOYMENT DETAILS Employer's Name and Address **Employment Date Retirement Date BENEFIT APPLICATION TYPE (Please tick as appropriate)** PWD 25% Enbloc Annuity Death Benefit Additional Benefit State Refund Pre-Act 4. ATTESTATION Applications will ONLY be processed if ALL the required documents are included. If any document is missing, the application will be considered INCOMPLETE and NOT ACCEPTED until the document(s) has/have been provided. Please refer to the attached document checklist applicable to your benefit application type. I confirm that the information provided by me above is true and correct and hereby indemnify VERITAS GLANVILLS PENSIONS LIMITED ("VGP"), its officers and privies from any liability whatsoever arising out of untrue information provided in this application. I further authorize VGP to update the RSA details stated above with any of my information so provided. Signature -----Date -----



REQUIREMENTS FOR PROGRAMMED WITHDRAWAL [RSA ABOVE N550, 000]

1	BENEFIT FORM & REQUEST APPLICATION LETTER	Included	No	t Applicable
2	DISENGAGEMENT LETTER/TERMINATION LETTER OR ACCEPTANCE OF RESIGNATION/CERTIFICATE OF SERVICE]	
3	2 PASSPORT PHOTOGRAPHS]	
4	ACCRUED PENSION RIGHTS LETTER FROM EMPLOYER {Private sector & Self-funding public sector only}]	
5	DECLARATION OF AGE/BIRTH CERTIFICATE {Date of Birth certificate/affidavit must tally with Trustfund/NIMC record}			
6	VALID MEANS OF IDENTIFICATION {NIMC identity card or Drivers' license or international passport only}		<u> </u>	
7	RETIREE INDEMNITY LETTER & PENCOM VERIFICATION SLIP (FOR ONLY FEDERAL GOVT RETIREES)]	
8	LAST 3 MONTHS PAYSLIPS {3 last month's payslips is mandatory}			
9	TWO (2) PROGRAMMED WITHDRAWAL AGREEMENT FORMS			
10	RETIREE CONSENT FORM {Tick the box for PW is mandatory}]	
	CLEARANCE LETTER FROM STATE (ONLY FOR LASPEC RETIREES, DELTA STATE RETIREES, NIGER STATE RETIREES & FC			
12.	NAME RECONCILIATION AFFIDAVIT (AFFIX DULY STAMPED PASSPORT)			
13.	REMITTANCES ISSUES: UNREMITTED/EXCESS/DUPLICATE/BULK PAYMENT. {CSOs/Benefit Officers should ensure RSA is checked properly}			
14.	DATA RECAPTURE (Kindly disregard if you have done so)			