

If yes, provide salary figures for 3 consecutive years within the last 10 years of employment ceasing	€	
	€	
	€	
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		%
Member		%
Additional Voluntary Contribution (AVC)		%
Total		%

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



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

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)

PPS Number should contain 7 digits and 1 or 2 letters. This is required for Revenue Approval.

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

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

Please sign and date

Signature

Date

Name in BLOCK CAPITALS

Name

Address

Telephone

Email