

Other Pension Benefits - Information required in accordance with Section 787R (4) Taxes Consolidation Act 1997

1. Have you received retirement benefits from any other pension arrangements? Yes No

If yes, please complete the following:

Name of scheme (if applicable)

Employer Name (if applicable)

Pension Type

Contact Details

Policy Number

Start Date of Policy

Date Benefits were paid

Salary

€

Retirement benefits you received

Retirement lump sum (before any tax paid)

€

For DC Schemes, PRSAs
or Personal Pensions)

Final value of the pension fund at the time of taking benefits

€

Annual pension income you are receiving if you were in a defined benefit scheme

€

a year

Final value of AVCs (if not included in the above amounts)

€

2. Have you any other pension arrangements where retirement benefits have not yet been taken or are about to be taken? Yes No

Name of scheme (if applicable)

Employer Name (if applicable)

Pension Type

Contact Details

Policy Number

Start Date of Policy

For DC Schemes, PRSAs
or Personal Pensions

Current value of the pension plan

€

For DB Schemes

Expected annual pension income you will receive

€

Expected retirement lump sum

€

a year

Current value of AVCs not included in the above amounts

€

3. Since 7 December 2005 have you, or do you no intend to transfer any other pension benefits to an overseas arrangement? Yes No

If yes, please complete the following:

Date or expected date of transfer

Contact Details for receiving scheme

Amount of transfer value

€

4. Do you have a Personal Fund Threshold Certificate issued by the Revenue Commissioners? Yes No

If yes, please provide a copy of your Personal Fund Threshold Certificate with this retirement form.

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