



RETIREMENT SAVINGS ACCOUNT (RSA) FUND TRANSFER INSTRUCTION

PLEASE FILL IN BLOCK LETTERS

SECTION A: PERSONAL DETAILS

Name (Surname First):
RSA PIN: Date of Birth
Telephone no: Email Address:

SECTION B: EMPLOYMENT DETAILS

Name of Employer: Sector:
Address:
Designation: Phone No.: Official Email:

SECTION C: RSA FUND TRANSFER REQUEST

Current Fund: Preferred Fund:
Date of Last Request: Reason for Request:
Remarks (Optional):

I hereby authorize NLPC Pension Fund Administrators Limited to effect the transfer, having been properly educated about the features of the Multi Fund structure for RSA Funds. I certify that the information provided above are correct and absolve NLPC Pension Fund Administrators Limited of any liabilities arising therefrom.

Signature Date

SECTION D: AUTHORITY TO DEDUCT

I authorize NLPC Pension Fund Administrators Limited to deduct ₦1,000 from my RSA, being the approved rate for the transfer request (please note that ₦1,000 will only be charged after the first transfer request within a year).

Signature Date

SECTION E: FOR OFFICIAL USE ONLY

Witnessing Officer

Name: Rank:

Branch: Signature & Date:

Transferring Officer

Name: Rank:

Fund Transferred from: Fund Transferred to:

RSA Balance Transferred: Total Units Transferred:

Authorizing Officer

Name: Rank:

Signature Date