First Guarantee PENSION LIMITED

RETIREMENT SAVINGS ACCOUNT OPENING FORM

SECTION 1

1. Personal Data

Tick box of your choice:

- ❑ Open Retirement Savings Account
- ❑ Open a Voluntary Contribution Account only
- ❑ Transfer Retirement Savings Account from other PFA

PLEASE COMPLETE IN CAPITAL LETTERS

Title | Surname

First Name | Sex (M/F)

Middle Name | LGA (see attachment) | Marital Status (see attached)

Date of Birth (DD/MM/YYYY) | State of Origin (see attachment)

Correspondence Address

Correspondence Address continue

State (see attachment) | Contact Phone No

E-mail address

2. Employment Record

Employer's Name in full

Employer's Name in full continue

Office Address

Town | State see attached

Employer RC Number | Employee's ID No

Date of Employment | Date of Confirmation

Designation

3. Monthly Pension Contribution

Employer's Contribution

Employee's Contribution

Voluntary Contribution

Total Contribution

4. Next of Kin

Title

Surname

Sex (M/F)

First Names

Middle Names

E-mail

Residential Address

Residential Address continue

Town

State (see attached)

Country (see attached)

Relationship

Contact Phone

SECTION 2

CERTIFICATION **I hereby certify that the information provided is true and correct**

Passport Photo
White background

Left Thumbprint

Right Thumbprint

Signature

OFFICIAL

0029

Form Reference Number

Agent Code Number

SECTION 3 Please complete this section for Account Transfer

PFA Code (see attached)

Please enter your RSA Number