



LEADWAY PENSURE APPLICATION FOR PAYMENT FROM RETIREMENT SAVINGS ACCOUNT. - AVC.

I hereby apply for withdrawal from my Retirement Savings Account (RSA). Find below my application details:

RSA Number

Date: (dd-mm-yyyy)

P	E	N															
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Affix Passport Picture Here
(Kindly write your RSA PIN on the reverse side)

Title	Surname	First name	Other names
Sex	E-mail	Date of Birth (dd-mm-yyyy)	

Residential address (Kindly note that the address & phone number would be used for further correspondence with you)

Mobile Number		Alternate Number	
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NOK details

NOK Name (Surname First)	NOK Telephone Number
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Employer details

Employer Name	Department	Designation
Tax identification number (TIN)		

Bank Payment Details

Bank Account Number	Bank Name	Bank Branch
Kindly provide us with any of the following documents below to further validate the bank details provided above. Kindly tick the correct option provided.		
Bankers Confirmation Letter	Statement of Account	Photocopy of Cheque-leaflet

Please note: ONLY applications with complete documents would be accepted and processed.

APPLICATION CHECK LIST FOR AVC	Official Use
A passport photograph	Note that income earned on Voluntary Contributions is subject to Personal Income Tax where withdrawn within 5 years.
Document validating bank details	

Note: ALL alterations on this form MUST be counter signed by the Customer.

Value of AVC as at date

Amount requested

I confirm that the information supplied above by me is true and correct and hereby indemnify LEADWAY PENSURE PFA LTD, and its officers from any liability whatsoever arising out of untrue information provided above by me.

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OFFICIAL USE

Confirm passport picture of customer with physical appearance	Confirm signature(branches with midas)
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I hereby certify that original copies of all documents submitted were sighted by me, and the application was duly completed.

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Name of Receiving Officer. *Signature & Date* *Branch Telephone number*

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Acknowledgement--Customer's copy

PEN..... **Name of Customer**.....

Bank Payment Details

Bank Account Number	Bank Name:	Bank Branch

Application check list

A passport picture	Note that income earned on Voluntary Contributions is subject to Personal Income Tax where withdrawn within 5 years.
Document validating bank details	

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Name of Receiving Officer. *Signature & Date.* *Branch Telephone Details*

Dear Customer, kindly ensure to collect and keep this acknowledgement for record purpose. For further enquiries, please contact us on 01-2800800 or 01-7644463.
We shall also update you on the progress of your application at every stage of processing till payment of your benefit