

ANNUITY BENEFIT APPLICATION FORM

Client's Name: _____ **RSA PIN:** _____

Please tick the appropriate boxes indicating whether correct information/documents have been provided and indicating incorrect information/documents have been provided.

| Benefit Documentation Confirmation | Correct | Incorrect |
|--|--------------------------|--------------------------|
| 1) Data recapture | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Names Review | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) PIN number review | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Valid means of ID (NIN slip, driver's license, or international Passport) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Passport photo review against what is uploaded on the system | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) Completed benefit application form | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) Appointment letter | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) Exit letter from the employer | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) Last 3 months Payslips | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) Date of birth review (DOB) | <input type="checkbox"/> | <input type="checkbox"/> |
| 11) Confirmation of Remittance Letter | <input type="checkbox"/> | <input type="checkbox"/> |
| 12) Confirmation of remittance of accrued right (FGN/State employee) | <input type="checkbox"/> | <input type="checkbox"/> |
| 13) Bank details review | <input type="checkbox"/> | <input type="checkbox"/> |
| 14) Consent form | <input type="checkbox"/> | <input type="checkbox"/> |
| 15) Provisional Annuity Agreement | <input type="checkbox"/> | <input type="checkbox"/> |

Documentation Checklist – Level 1

Officer's Name

Signature & Date

Documentation Checklist – Level 2

Officer's Name

Signature & Date