PARTHIAN
PENSIONS

# PROGRAMMED WITHDRAWAL CONSENT FORM

This Consent Form is in line with Section 7 (1) (b) of the Pension Reform Act, 2014 "which gives a retiree the option of Programmed monthly or quarterly withdrawals calculated on the basis of an expected life span" and is pursuant to Clause 3.6 of the Programmed Withdrawal Agreement executed by me on...../...../.....Wherein, I..... of..... (Residential Address) do hereby declare that I have been properly enlightened on how my retirement benefit was computed and agreed with the recommended allowable lump sum and monthly/quarterly pension withdrawal which are based on information provided by me and correctly applied on the Standard Programmed Withdrawal Template. Please find below details of my information as provided by me and the agreed retirement benefit payout.

## RETIREES' PERSONAL INFORMATION AND BENEFIT PAY-OUT

| RETIREES' PERSONAL INFORMATION AND BENEFIT PAY-OUT | |
|---|---|
| Gender | |
| PIN Number (12 Digits) | |
| Date of Birth | |
| Age at Retirement | |
| Date of Retirement | |
| Email Address | |
| Mobile Phone Number | |
| RSA Balance as at Programming Date | ₦ |
| Lump sum | ₦ |
| Monthly/Quarterly Pension | ₦ |

I also consent to the periodic enhancement of my monthly/quarterly pension (please tick as appropriate) based on increased earnings in investment as may be approved by the National Pension Commission from time to time.

**ATTESTATION**

This is to confirm that I have attached and submitted the documents below.

**NAME.....**

**SIGNATURE.....**

**DATE.....**