



Affix Recent Passport
Photograph

NOTICE OF RETIREMENT

Please fill form clearly in capital letters (one letter per box)

1. Account Holder's Particulars:

Title

Surname

First Name

Middle Name

PIN

Date of Birth

Sex (M/F)

Effective Date of Retirement

Marital Status

(dd/mm/yy) (dd/mm/yy) (M/S/D/W)

Permanent Home Address:

Current Contact/Mailing Address:

Contact/Mailing Address (After retirement):

House Tel. Number

Mobile Tel Number

2. Current Employment Details:

Employer's Name and Address

Employer Code

Total Annual Remuneration N: (Attach last Pay Slip)

3. Details of Benefits:

Accumulated Contributions

Amount of Retirement Bond N

(If a public sector employee) State if Remitted to RSA: Yes No

Amount of Accrued benefits N

(If a private sector employee) State if Remitted to RSA: Yes No

Total Balance on RSA: N

Expected Contribution to Date of Retirement N:

4. Reason/Ground for Retirement (Please tick appropriately)

Mandatory Retirement

Medical

Terms and Condition of Employment

a.) If on Medical, State Reasons:

Medical Condition:.....

.....

Name and Address of Physician/Hospital that issued the medical certificate:

.....

Date of Medical Certification

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(dd/mm/yy)

b.) If under Terms and Conditions Of Employment:

State Unique Terms and Conditions of employment:

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Certification by PFA:

PFA Code:

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Authorised Signatory

Official Stamp

Name: _____ Designation: _____

Date: _____

DOCUMENTS TO BE ATTACHED:

- (i) Official Notice of employment from employer.
- (ii) Last pay-slip.
- (iii) Any other evidence of total annual remuneration (specify).
- (iv) CTC of Retirement Bond Certificate (for employees in public sector).
- (v) Acknowledgement of debt (for employees in private sector)
- (vi) Medical Certificates (where retirement/exit is on medical grounds).
- (vii) Letter of notification of retirement by employer authenticating medical certificate.
- (viii) Terms and conditions of employment.
- (ix) Passport photograph
- (x) Programmed Withdrawal template