



RETIREMENT SAVINGS ACCOUNT (RSA) REGISTRATION FORM

Please fill clearly and use Capital Letters only

* Mandatory Field, ** Conditional Mandatory Field

Please affix a recent coloured passport photograph taken against a white background. Ensure your Name is boldly written at the back of the affixed passport photograph

*Passport

* Form Reference Number 3 1 C R ** Temporary PIN

* Registration Type: (Please tick as applicable) New RSA Registration [] TPIN Regularisation []

1. Personal Data

*Title (Mr, Mrs, Miss, Ms) *Surname *First Name Middle Name Maiden Name/ Former Name * Place of Birth * Nationality * NIN (National Identity Number) BVN (Bank Verification Number) Personal Email Address *Date of Birth (DD/MM/YY) *Gender M [] F [] *Marital Status MD [] SG [] DV [] WD [] **State of Origin **L.G.A. *Phone Number Alternate Phone Number (Country Code + Tele/Mobile Number)

Residential Address House No./Name **Zip Code ** LGA Code Street Name ** State of Residence Code ** Village/Town/City * Country of Residence Code P.O.Box.P.M.B * Location Nigeria (N) [] Abroad (A) []

Bank Details (For Micro Pension Only) Bank Name Account Number Account Name

2. Employment Record

1. Public Sector Employees [Federal (PU)/ State (ST)] 2. Private Sector Employees (PR) 3. Micro Pension Plan (MP) 4. Cross Border Employees (CP)

* Employer Type * Is your Employer under IPPIS? [] Yes [] No * Nature of Business ** Full Name of Employer Employer Code: RC No: Employer ID

Employer's Address Building No./Name ** Location Nigeria (N) [] Abroad (A) [] Street Name ** State Code ** Village/Town/City * Country Code Employer's Email Address **Zip Code Employer's Phone Date of Current Appointment ** LGA Code ** Date of First / / Designation/ Rank **Date of Transfer of Service / / P.O.Box/P.M.B

3. Next of Kin (NOK) Details

*Title (Mr, Mrs, Miss, Ms)	<input type="text"/>	*Surname	<input type="text"/>	*Date of Birth (DD/MM/YY)	<input type="text"/> / <input type="text"/> / <input type="text"/>
*First Name	<input type="text"/>	Middle Name	<input type="text"/>	* Marital Status	MD <input type="checkbox"/> SG <input type="checkbox"/> DV <input type="checkbox"/> WD <input type="checkbox"/>
*Phone Number	<input type="text"/>	* Relationship	<input type="text"/>	*Gender	M <input type="checkbox"/> F <input type="checkbox"/>
NOK Email Address	<input type="text"/>				

NOK Address

House No./ Name	<input type="text"/>	**Zip Code	<input type="text"/>	** LGA Code	<input type="text"/>
Street Name	<input type="text"/>			** State of Residence Code	<input type="text"/>
**Village/ Town/City	<input type="text"/>			* Country of Residence Code	<input type="text"/>
P.O.Box/ P.M.B	<input type="text"/>			* Location	Nigeria (N) <input type="checkbox"/> Abroad (A) <input type="checkbox"/>

Note: For Additional Next of Kin, please send the Details to "customercare@nlpcpfa.com"

4. * Notification Setup - Please tick the appropriate box

Please indicate where you would want your correspondence sent to (e.g Statement of Account, Welcome letter, etc) E-mail & SMS Only Residence Don't Deliver

5. * Customer Authorization for access to National Identity Number (NIN) Information

I hereby certify that the information provided in this form is correct. I further consent and authorise the National Identity Management Commission to release my NIN information (as may be required) to the National Pension Commission (PenCom), upon request by my Pension Fund Administrator, for the maintenance and operation of my Retirement Savings Account. It is my understanding that PenCom shall exercise due care to ensure that my information is secure and protected.

Name	<input type="text"/>															
Address	<input type="text"/>															
**Signature	<input type="text"/>										Date	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>

6. * For Official use Only

Does the applicant have any physical challenge? Yes No If yes, tick Type Partial Permanent

Please Specify

I hereby certify that the information given above is correct to the best of my knowledge. This form was administered by:

Surname	<input type="text"/>																			
First Name	<input type="text"/>																			
Designation	<input type="text"/>																			
Signature	<input type="text"/>										Date	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>				
Supervisor Name	<input type="text"/>																			
Signature	<input type="text"/>										PIN NO	P	E	N	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>										Agent Code	<input type="text"/>								

Supporting Documents (Please tick the appropriate box)

General Documents:

- National Identity Card or Slip - Issued by the National Identity Management Commission indicating the National Identity Number (NIN)
- Means of Identification - Staff ID/ Valid Driver's license/ Voters card/ Valid International passport.
- Letter of First Appointment (Public Sector Employees)
- Letter of Employment (Private Sector Employees)
- Letter of Attestations (Police Personnel)

Cross Border Registration only:

- Evidence of Nationality - Copy of Data Page of the International Passport (for non-Nigerian)
- Work Permit - Evidence of work permit in host country.
- Letter of undertaking - To bear exchange rate fluctuations
- Evidence of Employment (in host country)
- Evidence of Remuneration - i.e pay advice (where applicable)

Micro Pension Registration only:

- Evidence of Membership (in a registered association or trade union Certificate of Business Registration)