



PENSIONS

**TEMPORARY ACCESS (25%) CONSENT FORM**

This Consent Form is in line with Section 7 (2) of Pension Reform Act (PRA), 2014 for processing of Temporary Access of 25% of the RSA balance for an Employee of Federal Government Treasury Funded, Ministries, Department and Agencies.

Wherein, I.....Of

(Residential Address) .....

do hereby declare that I affirmed that 25% payments would be based on RSA balance, as at the date of application, pending the release of Accrued Rights and or Outstanding Contributions by the National Pension Commission. I also agree that no further payment would be made to me until I turn 50 years.

Please find below details of my information provided and the agreed retirement benefit pay-out.

<b>RSA HOLDER'S PERSONAL INFORMATION AND BENEFIT PAY-OUT</b>	
Name	
PIN	
Gender	
Date of Birth (DD-MMM-YYYY)	
Current Age	
Date of Retirement /Disengaged/ Resignation (DD-MMM-YYYY)	
RSA Balance as at date of application ₦	
25% Entitlement ₦	

SIGNATURE:.....

DATE:.....

TELEPHONE NUMBER:.....

EMAIL ADDRESS:.....