



Checklist For Deceased Person Application

- ☐ **Application Form**
Where there are multiple administrators/executors on the Letter of Administration (LOA)/Will, any one of the named administrators can initiate the application process
- ☐ **Passport Photograph**
- For record purposes, we require a copy of the deceased's passport photograph.
 - We also require passport photographs of the named administrator/executor(s) on LOA
- ☐ **Evidence of Death**
A medical certificate of death is required where the deceased died in a hospital and a death certificate is required from the National Population Commission (NPC), where the deceased died outside a hospital. If a NPC certificate is presented, any of the underlisted is required.
- Burial warrant issued by a local government council
 - Evidence of Death/Burial issued by an Islamic Community Head or Judge of a Sharia Court
 - Evidence of Death issued by a leader of a registered Church
 - Copy of obituary poster (if any)
- A police report should also be provided if the death does not occur from a natural cause
- Kindly note that where the RSA holder died in a hospital outside Nigeria, the beneficiaries are to depose to an affidavit confirming same
- ☐ **Retirement Letter**
The letter (which should be on the letter head of the employer) must state the effective date of retirement.
- ☐ **Will admitted to Probate or Letter of Administration (LOA) or * Sealed Order**
- The Will/Probate Letter should indicate the existence of a pension account with the PFA on the inventory of assets; otherwise, the applicant is required to provide a LOA.
 - The LOA is also required where the deceased client died intestate i.e., without a valid will.
 - The Birth certificate or Age declaration for any minor on the LOA should be provided.
 - Sealed Order obtained from Upper Area Courts/Area Courts (*applicable to Northern states only)
 - The application should be submitted for processing in the same State the court that issued the LOA is located. Otherwise, the LOA should be re-sealed in the different State that the application will be submitted.
- Kindly note that the LOA must include "Pensions with Stanbic IBTC Pension Managers Limited" on the inventory of assets
- ☐ **Indemnity**
This form is available at any of our branches/locations and is to be filled and duly signed
- ☐ **Means of Identity**
Valid means of ID is any one of the under listed;
- Valid International Passport
 - National Identity Card/NIN slip
 - Valid Driver's License
- ☐ **Confirmation of Signature from the Bank**
Kindly note that each administrator/executor is required to present a confirmation of signature from his/ her bank and the letter must contain an affixed passport cross stamped by the bank and signed by authorized signatories
- ☐ **Original Bond Certificate (Lagos State retiree only) & Clearance Letter (Lagos & Osun State retirees only)**
- Original certificate received during LASPEC Bond ceremony
 - The named administrator/ executor(s) is to complete the State's (Lagos & Osun) clearance process on behalf of the deceased to enable the Government Issue a clearance letter to Stanbic IBTC Pension Managers
 - Self-funded Lagos State institutions are not required to submit bond certificates.
- ☐ **Employer confirmation (Applicable to only employees that died in active service)**
A letter will be sent from Stanbic IBTC Pension Managers to the client's previous employer requesting confirmation of the death of the employee
- ☐ **Confirmation Letter (Private Sector Clients and Self-Funded Government Organizations Only)**
A letter will be sent from Stanbic IBTC Limited to the client's previous employer to confirm remittance of all contributions into the client's RSA. The application can only be processed for approval from the National Pension Commission on receipt of the employer's response.
- ☐ **Letter of Retirement and Verification Slip**
Beneficiaries of deceased retirees of Treasury funded MDA are to provide both documents while beneficiaries of deceased retirees from Private Sector and Self-Funded Agencies are to provide the deceased's Retirement Letter only .
- ☐ **Newspaper publication (peculiar to Niger State Judiciary only)**
LOAs issued in Niger State are to be received alongside a newspaper publication. This is a requirement by the Niger State Judiciary
- ☐ **Bank Account Details**
The named administrator must fill his/her valid Bank Account Number on the application form.
- where there are multiple administrators/executors on the LOA, payment will be made into either an estate account or a jointly nominated bank account and a letter of consent, jointly signed by all named administrators will be required.
 - where any co-administrator/executor is resident abroad, payment would only be made to an Estate account to which all the administrators/executors are joint signatories and a reference letter from the bank to this effect is required
- ☐ **For Additional documentation (optional):**
- Burial warrant issued by a Local Government Council
 - Evidence of Death/Burial issued by an Islamic Community Head or Judge of a Sharia Court.
 - Evidence of Death/Burial issued by a Leader of a registered church.
 - Copy of obituary poster (if any)



Place Your
Passport
Photograph
Here

Application For Payment From Retirement Savings Account (RSA)

Benefit Application Type (please tick only one box)

☐ 25%

☐ En Bloc Payment

☐ Missing Person

☐ Pre-Act Contributions

☐ Deceased Paymentt

☐ Health Grounds

☐ Lump Sum/Programmed Withdrawal

☐ Employee Portion (Old Scheme)

☐ Foreigner Payment

☐ Lump Sum/Annuity

☐ Nigerian Social Insurance Trust Fund (NSITF)

Personal Details (please note that all fields with asterisks (*) are compulsory)

*RSA PIN

*Name

*Address

*Mobile Number

Email Address

*Date of Birth

DD/MM/YYYY

Bank Verification Number

*National Identity Number

*Gender

Employment Records

*Last Employer Name

*Date of Exit

DD/MM/YYYY

Bank Account Details

*Bank Name

*Bank Account Number

Details of Administrator/Executor

*Name

*Relationship

*Address

*Mobile Number

Email Address

*Gender

Attestation

I confirm that the information supplied by me above is true and correct. I hereby indemnify Stanbic IBTC Pension Manager Limited, its officers and associates from any liability arising out of untrue information provided by me above. I further authorize Stanbic IBTC Pension Manager Limited to update my RSA details stated above with any of my information so provided

*Signature

*Date

DD/MM/YYYY

Applications will only be processed if they include all the required documents listed in the attached checklist. If there are any outstanding documents, the application will be considered incomplete and not accepted until all documents are provided. Please refer to the attached document checklist for your application type.

Please be informed that you would receive a confirmation via SMS or EMAIL acknowledging receipt of your application within 48hours. If you do not receive this notification within 48hours of submitting your documents at any of our branches/service locations, kindly contact our 24 hours 7 days a week multilingual Contact Centre on 0201271-6000. You can also track your application status via SMS by sending APPLICATION to 30388. SMS costs N10. Free status tracking is available using your secure login details on our website www.stanbicibtpension.com

For Official use only

I hereby certify that this application was duly completed and submitted along with the required documents. I also confirm that original documents were duly sighted by me at the point of application submission.

DD/MM/YYYY

Name of Receiving Officer

Signature/Date

CRM Reference Number

Branch/Service Location

Customers Reciept

DD/MM/YYYY

Customer Name

RSA PIN

Submission Date

CRM Reference Numbers

Receiving Officer

Branch/Service Location



BA/FOM/V3

The Managing Director
Stanbic IBTC Pension Managers Limited
76 Adetokunbo Ademola Street
Victoria Island
Lagos

Dear Sir

CONSENT LETTER FOR PAYMENT OF DEATH BENEFITS

We, the under-listed administrator/executors as named on the attached letter of Administration, hereby notify Stanbic IBTC Pension Managers that we unanimously agree that the benefits in the Retirement saving account (RSA) of the **Late**with RSA PEN.....be paid to the bank details below.

Account Name.....

Account Number.....

Bank.....

Yours faithfully

ADMINISTRATOR/EXECUTOR NAME	SIGANTURE	PHONE NUMBER(S)	DATE

All administrators/executors must sign the consent letter

For Official Use Only

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I hereby confirm that the administrator(s) to the above-named deceased client signed this consent in my presence.

CSO/ASO/BSM.....

Signature.....Date.....Branch.....

TO: Stanbic IBTC Pension Managers Limited
76 Adetokunbo Ademola Street
Victoria Island
Lagos State
Nigeria

INDEMNITY

THIS INDEMNITY is given by,of
(hereinafter called “the Indemnitor” which expression shall where the context so admits include my heirs, personal legal representatives and assigns) to **Stanbic IBTC Pension Managers Limited** having its Head Office at 76, Adetokunbo Ademola Street, Victoria Island, Lagos.

WHEREAS

1. Stanbic IBTC Pension Managers Limited is duly licensed by the National Pension Commission (PenCom) to operate as a Pension Fund Administrator (“PFA”);
2. The Indemnitor is the Next of Kin or the Executor/Administrator/Administratrix to the Estate of (“hereinafter referred to as the deceased client”) being the holder of Retirement Savings Account No (“RSA”) with Stanbic IBTC Pension Managers Limited;
3. The Indemnitor has notified Stanbic IBTC Pension Managers Limited of the death of the deceased client and has now submitted withdrawal application seeking to access the deceased client’s pension contribution in his/her RSA;
4. The Indemnitor has complied with the regulatory requirements stipulated by the Pension Reform Act 2004 (“the Act”) as well as all other ancillary regulations issued by the National Pension Commission (“PenCom”) and Stanbic IBTC Pension Managers Limited’s Death Benefit Application Process and provided documentation to show adequate evidence of death of the deceased;
5. Based on the NOK’s assertions and submissions, Stanbic IBTC Pension Managers Limited has now sought and obtained the approval of PenCom to pay the consolidated amount in the deceased RSA to the Indemnitor;
6. In compliance with this regulatory directive, and as part of Stanbic IBTC Pension Managers Limited’s death benefit application process, Stanbic IBTC Pension Managers Limited has requested, and the Indemnitor has agreed to execute this indemnity in favour of Stanbic IBTC Pension Managers Limited in the manner hereinafter appearing.

IN CONSIDERATION of the above, the Indemnitor hereby undertakes to adequately indemnify Stanbic IBTC Pension Managers Limited for all losses, damages, injuries, costs and expenses whatsoever which may be incurred by Stanbic IBTC Pension Managers Limited as well as against all actions, proceedings or claims which may be brought against Stanbic IBTC Pension Managers Limited, all in relation to instructing its PFC to disburse the consolidated amount to the designated bank account of the indemnitor.

This indemnity shall be a continuing obligation on the indemnitor until Stanbic IBTC Pension Managers Limited shall have been discharged from further liabilities by the indemnitor upon receipt of the redeemed sum.

SIGNED SEALED AND DELIVERED

By the within named Indemnitor

(Name and Signature)

Dated this ____ day of _____ 20____

In the presence of:

Name: _____

Address: _____

Occupation: _____

Telephone No: _____

Signature: _____

Date: _____