

**PENSION ADMINISTRATION REGISTRATION FORM**

PLEASE COMPLETE ALL INFORMATION IN CAPITAL LETTERS  
(Mandatory Fields \* Conditional Mandatory Fields \*\*)



**1. \*REGISTRATION TYPE - Please tick as applicable**

New RSA       Data Update       Transfer Window  
 CPS       Active       Temporary Pin Regularisation  
 Retiree

Are you registered with any Pension Fund Administrator (PFA)?

YES       NO

\* Please sign in the box below

**2. PERSONAL DATA**

\* Surname

\* First Name

Middle Name

\* Title      \* Marital Status      \* Gender

(Mr/Mrs Ms/Miss)     
  Single(SG), Married(MD)     
  (M/F)  
 Widowed(WD) Divorced(DV)     
  Separated(SP)

\* Date of Birth (DD/MMM/YYYY)      \* LGA Code      \* State of Origin

/  /      
      

(E.g : 01 / JAN / 2000)      (See attached code list)

\* Nationality

Maiden/Former Name

**Residential Address**      P.O Box      \* House No./Name

\* Location

Abroad       Nigeria

\*Street Name

\* Village/ Town/ City      \* State Code

\*\*Zip Code      \* LGA Code      \* Country Code

\* Phone Number (Dialing Code + Mobile Number)

Email Address

**3. EMPLOYMENT RECORD**

\* Sector Classification

Public Sector -PU      State- ST  
 Private Sector - PR  
 Cross Border - CB

\* Name of Organization

\*\* IPPIS      \*\* Date of Joining IPPIS (DD/MMM/YYYY)      \*\* IPPIS No.

Yes       /  /      

No

**Organisation Address**      P.O Box/PMB      \*Building No./Name

\* Location

Abroad       Nigeria

\*Street Name

\*\*Zip Code      \* LGA Code      \* State Code      \* State of Posting

\* Village/ Town/ City      \* Country Code

\* Employer's Phone Number (Dialing Code + Mobile Number)

\* Employee ID/ Staff file No. (Public)      \*\* Service ID No. (Police/Para Military)

\* Date First Appointment (DD/MMM/YYYY) --Public Sector only

/  /

Date of Current Appointment (DD/MMM/YYYY) --Public and Private Only

/  /

\*\* Date of Transfer of Service (DD/MMM/YYYY) --Public Sector only

/  /

Designation/Rank

Official Email Address

**4. PERSONAL IDENTIFICATION**

\*\* ID Number / Int'l Passport Number for Non-Nigerians only

\* National Identity Number (NIN) Nigerians Only.

Bank Verification Number (BVN)

\*\*RSA Personal Identification Number(RSA PIN)      \*\* PFA Code

PEN

Temporary PIN (if available)

Other RSA PIN and PFA where applicable      PFA Code

PEN

**5. NOTIFICATION SETUP -Please tick the appropriate box**

Please Indicate where you would want correspondences sent to

( e.g Welcome letters Statement of Account etc )

E-mail Only       Residence       Don't Deliver

\* Please sign in the box

**6. AUTHORISATION GIVEN IN RELATION TO THE PROCESSING OF ELECTRONIC MAIL INSTRUCTIONS ISSUED TO STANBIC IBTC PENSION MANAGERS LIMITED**

# PENSION ADMINISTRATION REGISTRATION FORM

I hereby authorise Stanbic IBTC Pension Managers Limited ("SIPML") to honour all e-mail instructions, mandates, consents, commitments and the like which may emanate from my e-mail address (as provided by me on this form) in respect of any Retirement Savings Account ("RSA") Personal Identification Number which may be assigned to me by the National Pension Commission ("Commission"), including any reclassification or renumbering of the RSA as specified by the Commission.

I hereby undertake to indemnify and hold SIPML harmless from any loss, actions, proceedings, claims, damages, costs and expenses that may be suffered or incurred by reason of honouring such instructions, mandates, consents, commitments and the like via electronic mail or other formats agreed between me and SIPML provided that SIPML has taken all reasonable and professional care required in dealing with such electronic mail. This Indemnity shall remain valid and binding on me throughout the period that SIPML remains my Pension Fund Administrator.

\*\* Please sign in the box beside

## 7. SOCIAL MEDIA DETAILS

Kindly tick your preferred social media network from the boxes below and fill in the corresponding handle name.

Instagram  Facebook  Twitter  Others (please specify)

## 8. NEXT OF KIN (NOK) DETAILS

\* Surname

\* First Name

Middle Name

\* Title (Mr/Mrs/ Ms/Miss)

\* Relationship

\* Gender \*Dialing Code \* Mobile Number

 (M/F)  

**NOK's Correspondence Address**

\* Location

Abroad  Nigeria

P.O Box/PMB

\* House No./Name

\* Street Name

\* Village/ Town/ City

\* State Code

\*\* Zip Code    \* LGA Code   \* Country Code

Email Address

## 9. SALARY STRUCTURE -Treasury Funded Public Sector Agencies Only

\*\*Harmonised Salary Structure (2004)   
( Eg. HAPSS, HATISS )

\*\*Consolidated Salary Structure (2007)   
( Eg. COMSS, CONTISS )

\*\*Consolidated Salary Structure (2010)   
( Eg. COMSS, CONTISS )

\*\*Current Salary Structure ( Eg. ENCONTISS )

\*\*GL as at June 2004  \*\*GL as at Jan 2007  \*\*GL as at 2010

\*\*Step as at June 2004  \*\*Step as at Jan 2007  \*\*Step as at Jan 2010

\*\*Current GL  \*\*Current Step

## 10. DATA CONSENT

I hereby certify that the information provided in this form is correct and I consent to the processing of my personal information (P.1) based on the requirements of the Pension Reform Act 2014 ( as may be amended) and the operations of Stanbic IBTC Pension Managers Ltd ( SIPML ) as a Pension Fund Administrator (PFA) licensed by the National Pension Commission.  I Do

## 11. CUSTOMER AUTHORISATION

### 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 authorize 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

\*  I Do

PLEASE PLACE  
PASSPORT PHOTO HERE

NAME & SIGNATURE  
SHOULD BE BOLDLY  
WRITTEN AT THE BACK OF  
THE PASSPORT

PASSPORT SHOULD BE ON  
A WHITE BACKGROUND

\*\* Please sign in the box below

\* Date ( DD / MMM / YYYY )

 /  / 

Client Name

Client Address

Form Reference No.:

021/CR  021/RR

## FOR OFFICIAL USE ONLY

### ATTACHED SUPPORTING DOCUMENT (Mandatory)

- \* (Please tick the appropriate box)
- Means of Identification (any one of the following )**  
(Company ID Card/Valid Driver' s license/Voters card /International passport /National Identity Card or Enrolment Slip)
  - Proof of Address (any one of the following )**  
(Utility bill within the past 3 months/ Recent Tenancy Agreements / Active bank statement within the past 3 months/National ID Card or Enrolment Slip /Valid Driver' s license/Voters card
  - Letter of First Appointment (Public Sector Employees)**
  - Letter of Employment (Private Sector Employees)**
  - Letter of Attestation(Police Personnel)**
  - Transfer or Acceptance of Service (Public Sector, where applicable)**
  - National Identity Card or enrolment slip** issued by the National Identity Management Commission indicating the National Identity Number (NIN)
  - Promotion Letters & Payslips for the following periods (Public Sector Employees)**  
30 Jun 2004, Jan 2007, Jul 2010, Dec 2013, Dec 2016 and Current

### Is Contributor / Retiree Physically Challenged?

YES  NO OTHERS

If YES, Tick Type :  PARTIAL Supporting Documents  COMPLETE  YES  NO

\* Agent Code

\* SAP ID

