

EMPOWER ACCESS

# **EMPOWER RETIREMENT SOLUTION PLAN**

# **EMPLOYEE APPLICATION FORM**

This form should only be used for NEW members of the EMPOWER Retirement Solution Plan. Please complete every item on this form in BLOCK CAPITALS. If any item is blank or illegible, this will cause a delay in processing your application. If you are unsure about any item, you should ask your HR department or the plan adviser.

Before you give us your personal information it is important that you know what your data protection rights are and how and why we use your personal information. This is set out in the Irish Life Data Privacy Notice which is always available on our website at http://www.irishlifecorporatebusiness.ie or you can ask us for a copy.

# Section 1: Scheme Details

Scheme Name				Schem	e Number 60		
Section 2: Your	Details						
Title	Mr Mrs Miss	Ms Other					
First Name		Surname					
Address	Please use both the first name and surname in your employee records.						
Phone	Work Mobile Please provide your mobile phone number and your email address, both are needed so you can access your pension saving details through our online services.						
Email Address							
Date of Birth		Male Female					
Relationship Status Married Single Widow(er) Separated Divorced Civil Partner							
PPS Number	PPS Number should contain 7 digits and 1 or 2 letters. This is required for Revenue approval.						
Section 3: Your	Employment and Me	embership Details					
Date employment start	ed /////	Date plan membership is to commen	ce /	/			
Payroll/Staff Number		Curr	rent Salary €		per annum		
Precise Occupation							
Are you a:	20% director Yes	No 5% director Y	es 🕖 No 🤇	С			
Section 4: Bene	fits from Previous Er	nployment Plan					
Are you entitled to pen	nsion plan benefits from a previ	ous employment or plan? Y	íes 🕖 No 🤇	$\bigcirc$			
If yes, please state the	name of the plan or employer						
If you wish to transfer t	hese benefits to this plan, plea	se fill out a separate Transfer of Benefit	ts Form.				
Section 5: Your	Pension Contribution	n Details					
Date plan contribution	s are to commence /						
		Regular	Once-off				
a. Employer Contribu	itions	. % of salary	€				
b. Compulsory Emplo	yee Contributions*	. % of salary					
c. Additional Volunta	ry Employee Contributions*	. % of salary	€				
*Note: Employees may qualify for tax relief on their own pension contributions. The percentage of your contributions that you can claim tax relief are shown in the table opposite. This includes any compulsory contributions to your main scheme and Additional Voluntary Contributions. Any contribution in excess of compulsory employee contribution paid by an employee will be treated as Additional Voluntary Contributions.			y of	Age <30 30-39	Maximum annual contributions as % of gross salary 15% 20%		
-	mit for tax relief on pension contrib per booklet or our website www.iri	utions for 2018 is €115,000. shlifecorporatebusiness.ie for details on the	e Standard	40-49 50-54 55-59	25% 30% 35%		
Fund Threshold allowable				55-59 Nge 60 & Over	35% 40%		

## **Section 6: Investment Details**

Please indicate your chosen investment option for your future contributions by ticking the box at the left hand side of your chosen option. Further information on the fund options is available on www.irishlifecorporatebusiness.ie. You must choose one and one only of Options 1 or 2 below. If you do not indicate your preferred option your future contributions will be invested in the default investment option chosen by the Trustees i.e. Option 1 below.

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BE MY GUIDE	The Trustees of the plan have selected the Irish Life EMPOWER Personal Lifestyle Strategy (EMPOWER PLS)* as the current default investment option for the plan. The EMPOWER PLS first invests in a growth fund and then starts to switch into less volatile funds from 11 years to retirement which helps protect your pension fund value against market fluctuations as you get closer to retirement. From 6 years to go until retirement the strategy also gradually moves your pension savings into funds appropriate to the retirement benefits that you are							
	likely to take at retirement. Please note that if the Trustees agree a new default investment option for the plan in the future you will automatically move to the new default investment option as outlined by them. *100% of contributions (this means Regular and Once-Off contributions) must be invested in a strategy if selected.							
Option 2	My own investment choice							
I'LL DECIDE	If you choose this option, you must tell us what percentage you wish to invest in each fund. You can invest 100% in one fund or spread it over a number of funds (subject to a maximum of 5 funds), but the total must equal 100%.							
		Risk Rating	Regular Contributions	Once-Off Contributions				
	EMPOWER Cash Fund (cash)		. %	. %				
	EMPOWER Stability Fund (mixed assets)	2	. %	. %				
	EMPOWER Cautious Growth Fund (mixed assets	) 3	. %	. %				
	EMPOWER Pension for Life Fund (bonds)	4	. %	. %				
	EMPOWER Growth Fund (mixed assets)	4	. %	. %				
	EMPOWER High Growth Fund (mixed assets)	5	. %	. %				
	Indexed World Equity Fund (equities)	6	. %	. %				

Group companies on one online platform). This is an area that will continue to improve with a view to adding new customer engagement offerings.
You can change your mind at any time and opt out of any further sharing by emailing cbconsentoptout@irishlife.ie or writing to the Irish Life Data
Protection Team. If you opt out we will keep a record of your instruction to opt out.

I agree 🔿 I don't agree 🔾			
🖉 Signature 🔀	Date	/	

I agree to Irish Life Assurance sharing my personal information (excluding my personal health information) with other companies within the Irish Life Group, such as Irish Life Health. I understand this is to assist in developing combined customer services (for example, access to services from different

## Section 8: Data Privacy Notice and Employee Declaration

Other funds (please specify)

Consent to Sharing with Other Companies in the Irish Life Group

Total

**Section 7: Optional Consent** 

#### **Data Privacy Notice**

I confirm I have been informed about the Irish Life Data Privacy Notice and where to find it.

#### **Employee Declaration**

I declare that the answers to the above questions are in every respect true and complete and that this application and declaration shall form the basis of the contracts with Irish Life Assurance plc. I declare that I have applied for membership to the plan to which this Employee application form relates and that specific conditions shall apply as indicated above. I hereby authorise my employer to make the necessary deductions from my salary or wages for the specific purpose of paying the employee contributions detailed earlier in this form until such time as the employer receives notice in writing from me to the contrary.

\land Signature	X	Date		/	/		

### Irish Life Assurance plc is regulated by the Central Bank of Ireland.

In the interest of customer service we will monitor calls. Irish Life Assurance plc, Registered in Ireland Number 152576, VAT number 9F55923G.



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4109cb (Rev 4-18) standard

Irish Life Corporate Business, Lower Abbey Street, Dublin 1, Ireland. T: 01 704 2000 • F 01 704 1905