



RC 612608

RELIABLE | SECURE | TRUSTED

Apt Pension

Funds Managers Ltd.

PEN

Form reference

Retirement Savings Account Opening Form

Please fill this form clearly in capital letters



Corporate Head Office Address

Federal Mortgage Bank Building, Plot 266, Cadastral AO,
Central Business District, Garki, Abuja.
Website: www.aptpension.com, Tel: 09-4614400, Email: info@aptpension.com

Sales Agent Details

Code	First Name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

STATEMENT DELIVERY MODE

Direct Delivery

Address

Town State LGA

Delivery by post

Postal Address

PMB/P.O.BOX Town LGA State

Delivery by Email

Hold Statement at APT Pension Office

FOR OFFICIAL USE	YES	NO
Form properly filled out in CAPITAL LETTERS	<input type="checkbox"/>	<input type="checkbox"/>
Personal Details	<input type="checkbox"/>	<input type="checkbox"/>
Employment details	<input type="checkbox"/>	<input type="checkbox"/>
Monthly Contribution	<input type="checkbox"/>	<input type="checkbox"/>
Next of Kin	<input type="checkbox"/>	<input type="checkbox"/>
Passport	<input type="checkbox"/>	<input type="checkbox"/>
Left thumbprint	<input type="checkbox"/>	<input type="checkbox"/>
Right thumbprint	<input type="checkbox"/>	<input type="checkbox"/>
Signature	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE ATTACH COPIES OF:	YES	NO
Letter of Appointment	<input type="checkbox"/>	<input type="checkbox"/>
Letter of Last Promotion	<input type="checkbox"/>	<input type="checkbox"/>
Birth Certificate /Sworn Declaration of Age	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of Transfer of Service(if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of Condonation and Merger of Service (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Latest Pay Slip	<input type="checkbox"/>	<input type="checkbox"/>
Passport(2)	<input type="checkbox"/>	<input type="checkbox"/>

Scanned by: Name _____ Sign _____ Date _____
 Data Captured by: Name _____ Sign _____ Date _____
 Verified by: Name _____ Sign _____ Date _____
 Processed by: Name _____ Sign _____ Date _____