

OPTION FORM: PENSION OPTION AT RETIREMENT

Our Ref:

SECTION A : RETIREMENT OPTION

I, the undersigned herewith wish to elect the following options regarding the application of my retirement benefit:

SURNAME :

FULL NAMES :

MEMBERSHIP NUMBER:

ID NUMBER :

RETIREMENT OPTION

(Kindly mark your choice)

Within NTRF
(Please complete Section B)

With External Insurer
(Please complete Section B & C below)

Life Annuity

Living Annuity Only *

Life Annuity and Living Annuity ** *insert the % in each*

Within NTRF Life Annuity Option elect your guaranteed period *(Please select one of the options)*

5 years

20 years

Within NTRF Life Annuity Option elect your Inflation target increase *(Please select one of the options)*

65%

100%

** If you elect Living Annuity, within NTRF, please complete the **Living Annuity Application Form** and the **Indemnity Form**.*

*** If you elect both the life and living annuity, you should consider paying an additional monthly tax as the tax paid on the two separate pensions might be less than your accumulated tax liability at the tax year-end.*

SECTION B : CASH AMOUNT OPTION

CASH: **R**

NO CASH:

Please specify the cash amount required

Confirm Amount in words:

SECTION C

I hereby declare that I have noted the content of the Fund's retirement option documentation and obtained financial advice and understand the options offered to me in full as well as the implications of my choice, that it is irrevocable and that it is still my wish that a monthly pension be purchased with the Full Benefit / Balance of my Benefit *(tick the applicable box)* at the following external Insurer:

COMPANY :

FINANCIAL ADVISOR/BROKER :

CONTACT DETAILS :

Tel No: **Cell No:**

.....
SIGNATURE

.....
DATE