



Early Release : Rollover Application Form

[Retirement Fund (Administration) (Amendment) Regulation 2009, Regulation 5(7)(d)]

A. PARTICULARS OF APPLICANT

(Ngaahi fakamatala fēkau'aki mo e tokotaha kole)

Member's Name: _____
(Hingoa)

Member IC: _____
(Fika Memipa)

Ministry/Department: _____
(Potungaue)

Phone No.: _____
(Telefoni)

Current Employer _____
(Ngaue'anga Lolotonga)

Address: _____
(Tu'asila)

Name of nominated Retirement Fund _____
(Hingoa 'o e Sino'i Pa'anga lolotonga)

Effective Date _____
('Aho e ngata ai)

B. DOCUMENTATION CHECKLIST

Application Form
(Foomu kole)

PSC/Appropriate Authority Decision
(Tohi tu'utu'uni mei he PSC)

Evidence of Employment
(Tohi fakamo'oni mei he ngaue'anga)

Evidence of nominated Retirement
Fund Membership
(Tohi fakamo'oni memipa Kautaha Pa'anga
Mālōlō fo'ou)

Evidence of approved
Retirement Fund Status
(Fakamo'oni 'oku tali koe Sino'i Pa'anga Malolo tali 'e
he Lao Tukupau 2007.)

C. DECLARATION

(Fakaha)

I hereby indemnify the Retirement Fund Board from any liability whatsoever, including any loss of benefit that may arise as a consequence in acceding and approving my application for the early release of my retirement benefits. ('Oku ou faka'ata 'a e Poate ki he Pa'anga Mālōlō mei ha nga'ahi mo'ua pe kau ai 'a e mole 'a 'eku monu'ia mālōlō mei he ngaue tu'unga 'i he tohi kole ni)

Signature: _____
(Fakamo'oni 'a e Memipa)

Date: _____
('Aho)

Official Use Only

Checked by:
Benefit & Claims Officer: _____

Verified by:
Operations Manager: _____

Recommendations

Approved Not Approved

Decision by:
Chief Executive Officer: _____

Date:

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