



Premium Pension Limited

Pension Fund Administrator

RETIREE INDEMNITY FORM

THIS IS TO CERTIFY THAT I, [redacted] of [redacted] with PIN Number [redacted] having retired from the service of [redacted] with effect from the [redacted] day of [redacted] ..

DO SOLEMNLY DECLARE as follows:

- 1. That I fall under the Contributory Pension Scheme established by the Pension Reform Act, 2004.
2. That I have not at any time prior to or after retirement collected any retirement benefit, including gratuity and/or pension from any institution, organization or person.
3. That I shall indemnify any institution, organization or person from whom any benefit had been so derived either by omission or commission and/or in anyway prejudicial to any regulations, guidelines or directives of the National Pension Commission or the Pension Reform Act, 2004.

[redacted]
DEPONENT

Sworn at the High Court

This [redacted] day of [redacted] .

BEFORE ME

(COMMISSIONER FOR OATHS)