Swing On...

Your retirement can be far better than you have in mind with **Personal Pension from Enterprise Trustees.**

Choose **ENTERPRISE TRUSTEES** for your advantage.

Contact us on +233 0307030069, 233 0302781560, 233 3122781562

Email: info.trustees@enterprisegroup.com.gh
ENTERPRISE PERSONAL PENSIONS

The Enterprise Personal Pension Scheme allows formal sector workers to make additional contributions towards retirement. This is geared towards enhancing their retirement benefit outside the mandatory schemes and any provident fund scheme.

Informal sector workers, who are usually not covered by the mandatory pension schemes, are also catered for under this scheme.

How does this scheme operate?

The scheme is administered by a Trust and contributions received from individuals into the pension scheme are invested per scheme’s Statement Of Investment Policy and in line with National Pensions Regulatory Authority guidelines. The scheme pays out lump sum benefits at retirement.

Contributions from formal sector workers are held in one account. Contributions from informal sector workers are apportioned into two different accounts based on the member’s preference, i.e. Savings Account and Pension Account. Persons above 60 can opt to hold a pure savings account. Members are at liberty to switch from one plan to another and will be limited to a total number of switches of three (3) in the lifetime of the contract. No switching before the first twelve months, and no additional switches within 24 months of a previous switch.

<table>
<thead>
<tr>
<th>HIGH</th>
<th>MEDIUM</th>
<th>LOW</th>
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<tbody>
<tr>
<td>PENSIONS</td>
<td>SAVINGS</td>
<td>PENSIONS</td>
</tr>
<tr>
<td>70%</td>
<td>30%</td>
<td>60%</td>
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When are benefits paid?

Formal Sector Worker

Contributors less than 50 years at entry can opt to make partial withdrawal in the last five years of the Savings Period. Minimum savings period is 10 years. Withdrawal in the last five years is limited to one withdrawal not exceeding 25% of total available benefit.

Contributors above 50 years at entry can make partial withdrawal after two years but limited to one withdrawal per year after qualifying for withdrawal. No restriction on percentage available for withdrawal.
Informal Sector Worker

- The Pension Account:
  Withdrawal is allowed on this account under the following conditions:
  - Retirement
  - Early retirement
  - Permanent Physical or permanent disability
  - Emigration
  - Death
Member can access the total of his benefits in lump-sum pay-out without deducting taxes

- The Savings Account:
  Withdrawal is allowed on this account under the following conditions:
  - After 36th month.
  - Partial withdrawal limited to 50% of the fund.
  - Partial withdrawals then allowed every two years after the initial withdrawal of not more than 25% of the fund.
  - Withdrawals on Pre Tax contributions prior to fifth year are tax deductible
  - Total lump sum pay out after fifth year Anniversary without tax deductions
  - Retirement
  - Early retirement
  - Transfer
  - Closure of account
  - Emigration
Complete using block letters

**Personal Details (Please complete in full)**

Surname

First Name

Previous Name/ Maiden Name

Title

Gender

Social Security Number

Nationality

Date of Birth DD/MM/YYYY

Cell Number

E-mail address

Postal address

**Employment Details (Please complete in full)**

Formal sector (tick)

Informal sector (tick)

Name Employer (if applicable)

**Contribution Details**

Pre tax amount (contributions before tax)

Post tax amount (contributions after tax)

Total

Yearly Update of contribution:

0% 5% 10% 15% 20% 25%

**Preferred Plan (For Informal sector persons only)**

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<tr>
<td>70%</td>
<td>30%</td>
<td>50%</td>
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High  Medium  Low
Do you contribute to any Pension Scheme administered by Enterprise Trustees Limited?
Yes [ ] No [ ]

If yes provide your member IDs

Beneficiary Details

<table>
<thead>
<tr>
<th>Surname</th>
<th>First Name</th>
<th>Date of birth</th>
<th>Title</th>
<th>Share %</th>
<th>Relationship to applicant</th>
<th>Phone number</th>
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Next of Kin Details (where a minor has been stated as beneficiary)

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<tr>
<th>Surname</th>
<th>First Name</th>
<th>Date of birth</th>
<th>Relationship to applicant</th>
<th>Phone number</th>
<th>Email</th>
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I the undersigned hereby authorise the accountant or my bankers to deduct the contribution and yearly update from my salary or bank account and remit the contribution to Enterprise Personal Pension Scheme with effect from:

Date (DD/MM/YYYY)

Declaration

I declare that to the best of my knowledge and belief, the information given in this form is complete and accurate.

Signature [ ] Date (DD/MM/YYYY) [ ]

Important information

If you do not receive your member ID within two weeks of submission, please contact: info.trustees@enterprisegroup.com.gh or call 0307 030509.
Scheme member ID

Select your source of payment by completing either the Employer Deduction form or Variable Direct Debit Authorization form.

MANDATE FORM – EMPLOYER DEDUCTION

Surname

First Name

Social Security Number

Staff Number

Name of Employer

Locational Address of Employer

Town

Region

Contribution Amount

Effective Date (DD/MM/YYYY)

Yearly Update of contribution:

0% 5% 10% 15% 20% 25%

I the undersigned hereby authorise the accountant to deduct the contribution and yearly update from my salary and remit the contribution to Enterprise Personal Pension Scheme using my Scheme member ID with Enterprise Trustees stated above.

Signature

Date (DD/MM/YYYY)
PERSONAL PENSION FORM

Scheme member ID

VARIABLE DIRECT DEBIT AUTHORIZATION FORM

REF# ____________________________ OIN ____________________________

CUSTOMER DETAILS

SURNAME ________________________________________________________________________

OTHER NAME(S) __________________________________________________________________

ADDRESS: _______________________________________________________________________

MOBILE NUMBER: ________________________________________________________________

EMAIL: __________________________________________________________________________

PAYMENT DETAILS

CONTRIBUTION (GHS): _______________________________________________________________________

AMOUNT IN WORDS: _______________________________________________________________________

DATE OF FIRST DEDUCTION DD MM YYYY

SUBSEQUENT DEDUCTIONS DAILY/WEEKLY/MONTHLY/QUARTERLY/YEARLY
(PLEASE UNDERLINE)

DAY OF EVERY DEDUCTION.........................until further notice in writing or
until........................../................../20............... 

YEARLY INCREMENT:

0% ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25% ☐
**INSTRUCTION TO BANK**

<table>
<thead>
<tr>
<th>NAME OF BANK:</th>
<th>________________________________</th>
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<tbody>
<tr>
<td>BRANCH WHERE ACCOUNT IS HELD:</td>
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<td>SHORT CODE:</td>
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<tr>
<td>TYPE OF ACCOUNT:</td>
<td>CURRENT [ ] SAVINGS [ ] OTHER [ ]</td>
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<tr>
<td>BANK ACCOUNT NAME:</td>
<td>________________________________</td>
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<tr>
<td>BANK ACCOUNT NO:</td>
<td>[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]</td>
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</tbody>
</table>

I/ WE THE UNDERSIGNED HEREBY AUTHORIZE THE BANK TO DEDUCT MY/OUR MONTHLY CONTRIBUTION INCLUDING FUTURE INCREASES AS INDICATED ABOVE SUBJECT TO THE TERMS AND CONDITIONS PROVIDED BELOW. ENTERPRISE TRUSTEES LIMITED IS HEREBY INDEMNIFIED AGAINST ANY CLAIM OR LIABILITY THAT MAY ARISE BUT NOT LIMITED TO MY/OUR PROVIDING THE WRONG BANK DETAILS, SCHEME NUMBER, OR ANY OTHER ERROR IN MY/OUR INSTRUCTIONS IN RESPECT OF WHICH ZENITH BANK ACTS IN IMPLEMENTING MY/OUR DIRECT DEBIT AUTHORIZATION. I/WE UNDERSTAND THAT THE WITHDRAWALS HEREBY AUTHORIZED WILL BE PROCESSED THROUGH AN AUTOMATED CLEARING HOUSE PLATFORM PROVIDED BY GHANAIAN BANKS.

**TERMS AND CONDITIONS:**

• The efficiency of the Direct Debit scheme is monitored and protected by all parties involved.
• If an error is made by any of the parties involved, you are guaranteed a full and immediate refund to own bank account by the originator of the error.
• The client can cancel this mandate by writing to Enterprise Trustees 30 workings days in advance of your account being debited.
• Where date for first debit is less than 10 workings days from the day this mandate is completed; deduction will start from date for subsequent deduction.
• Nominal transaction fee for effecting deduction through the Automated Clearing House will be surcharged to your pension account.

CLIENT SIGNATURE(S) : __________________________ DATE, __________________________ DD MM YYYY

INTERNAL USE ONLY
REVIEWED BY : __________________________ DATE __________________________ DD MM YYYY