

Discretionary Resident Permit Application Financial Circumstances – Pensions

Applicant First name(s):			
Applicant Surname:			
Applicant's date of birth:			
Application number:			
(Please complete one Form C for each pension you have) Please complete the sections below. If any sections are not applicable, please state 'N/A'.			
Section 1: Pension Scheme			
Name and Address of Plan o Policy	r		
Number of Scheme, Plan or Policy			
Type of Scheme, Plan or Policy (e.g. Final Salary, Money Purchase)			
Section 1a: Supporting Documentation (If applicable)			
Туре		Tick	
Please provide your most re	cent pension statement		
Section 2: Retirement Benefits			
Earliest date when benefit can be paid			
The estimated lump sum and	d		
monthly pension			
payable on retirement,			
assuming you take the			
maximum lump sum.		_	
The estimated monthly			
pension without taking			
any lump sum			
Section 3: Pension Contributions			
Monthly contribution to the	_		
pension listed in Section 1.			

Section 4: Declaration		
I declare that all of the information submitted in respect of this form is correct to the best of my knowledge and belief; and		
I understand that it is an offence under the Population Management (Guernsey) Law, 2016 (the "Law") for any person who in connection with an application for a Certificate or Permit knowingly makes any false statement or recklessly makes any statement which is false in a material particular and/or knowingly fails to produce or furnish any information to the Population Management Office which is required under the provisions of the Law or any Ordinance made there under.		
Date:		
Full Name:		
Signature:		