

APPLICATION FOR RETIREMENT/ SEPARATION/ LIFE INSURANCE BENEFITS

Form No. 06302017-RET

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Actainmed 111	Direct or indire the accomplish ve, civil and/or c	ct commission of fraud, iment of this form, or riminal action.	collusion, f In obtainir	alsification ng any be	n, misrepres nefit under	entation of facts, of this application s	r any other kind of shall be subject to			
Date:					.2					
I hereby appl the following	y for a retireme	ent/separation/life insur	rance bene	fit with th	e GSIS and	declare to the bes	t of my knowledge			
Last Name		First Name		Middle N	ame	GSIS Business Part	tner (BP) No.			
Complete Ma	iling Address				***************************************	<u> </u>				
Date of Birth	(mm/dd/yyyy)	Place of Birth		······································	Gender	☑ Female	☐ Male			
Contact No. (Landline)	Celiphone No.	• • • • • • • • • • • • • • • • • • •	E-mail ad		To Lewale	T Wale			
Civil Status	Married	Single	If married							
	Separated Divident Avidence						, Middle Name)			
Retirement/S	eparation Benefit	ts Previously Availed (if ap	Date of M	arriage:			£ 5.7			
	☐ RA 660	☐ RA 1616		☐ RA	8291					
	nor to apply fo									
Retiren	ent benefits und	der the retirement mode n	narked belo	w, effectiv	e	, laff	ix my signature			
RETIREMENT LAW	my chosen option	n. (Please refer to the Terr			ach retirem	ent mode on subseq	uent pages)			
RA 660	Relow see	RETIRE 60, monthly annuity paya	MENT OPTI				SIGNATURE			
	Aged 60 to	below 63, 3-year lump si	iole annuali um. 2 vears	y tor 5 yea balance oa	rs Ivable on th	e 63 rd Birthday				
	monthly a	nnuity after the 5-year gu	aranteed pe	eriod	* 36		:			
55 A 4 4 4	Aged 63 at	nd above, 5-year lump sur	n, monthly	annuity aft	er the 5-yea	r guaranteed period				
PD 1146	Immediate 60 months	Monthly Pension x Basic Monthly Pension	(BMP) and I	3MP after	5 years					
RA 8291	Option 1: 6 Option 2: 1	60 months x BMP and BM 18 months x BMP and BM	P after 5 yea P to start on	ors I date of re	tirement		**************************************			
RA 1616		Retirement Premiums (Re	term of the state	A Charles and the Control of the Con		· Employer)				
APPLICATION FOR CLASP	outstanding lo (CLASP) progra interest rate of	retire under a retirement an obligation on installment am. The remaining balance f 10% per annum compour	nt scheme ent basis un ce of your o nded annual	with an in der the Ch utstanding lly (paca). I	nmediate m oice of Loan obligation s Please indica	ionthly pension, yo Amortization Scheo Shall be restructured te your choices belo	dule for Pensioners as a loan with an w:			
	As payment for my outstanding obligation, please deduct from the proceeds of my retirement benefit the amount equivalent to:									
	I 100%, since I am not availing the CLASP									
	75%, remaining balance of 25% shall be paid through CLASP									
	50%, remaining balance of 50% shall be paid through 25%, remaining balance of 75% shall be paid through				P					
	Preferred repayment term for the remaining balance:									
	1 year 2 years		- 		Managarana y					
	□ 3 years	water the state of								
	Act", and its Impl disclosure of my I basic credit data	have read and fully unders oply with them. Pursuant to f lementing Rules and Regulat basic credit data and update with lenders authorized by to the provisions of R.A. No. 93	Republic Act (tions (IRR), 1 l ts thereon to the CIC. and (R.A.) No. 95 hereby ackn the Credit I credit renor	10, otherwise owledge and nformation Co ting agencies	known as the "Credit consent to: 1) the reg prparation (CIC); and 2	Information System ular submission and			

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and month!	y pension up	with lace	than 15 years in	service (C	ash Benefit pay	able im	imediately)		
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claration of	I undertake	e to subm	it my Declaration	n of Pend	ency/Non-Penc	ency of	r case, duly su ver, as a cond	ubscribed and sworn dition for the release	of
ndency/Non-	before a N	otary Pub	lic or Administer	ing Uttice	s or my agency Section II of C	SC Reso	lution No. 13	dition for the release 02242 dated 1 Octo	per
ndency of Case	3	nent bene	nt and in compi	OHCE WITH	JC601011 11 01 01				
	2013.								
LIFE INSURANCE	E BENEFIT						1 nal(m).		
pe of Life Insurar	nce: Cor	mpulsory	□ Optional	Policy	No. (if claiming	for Opt	ional Policy):		
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