



NATIONAL PENSION COMMISSION
DEATH NOTIFICATION FORM (APPENDIX I)

From MDA To: .PenCom

Name of Employee:/...../.....

Surname First Name Middle Name

Date of Birth: (DD/MM/YYYY)... Gender:...(Male/Female).....

Marital Status.....

State of Origin Local Govt Area.....

Date of death: (DD/MM/YYYY) Cause of death.....

Date of appointment.....(DD/MM/YYYY) File Number

Designation..... Grade Level..... Step

Total Annual Emolument: N.....

Name & address of Next of kin:

.....

Has employee opened RSA?..... Yes/No.....

Name of PFA: PIN No:

Has death been reported under the former insured scheme:..... Yes/No.....

If yes, Name of the Scheme:.....

If yes, has any payment been made ... Yes/No.....

Details of former Insurer.....

Remarks:

We hereby give you formal notice that Mr./Mrs.

..... died on the Day of 200..... and we hereby advise
and authorize you to pay the death benefit due in respect of the deceased, to his/her Retirement
Savings Account Number With (Name of PFA) through the Custodian.

We enclose the following documents: (Original to be sighted)

- i) Medical Certificate of Death/Cause of Death
- ii) Certificate of Registration of Death
- iii) Police Report(if death is by accident)
- iv) Burial Warrant issued by Local Govt Council
- v) Evidence of Death/Burial issued by Imam or Pastor
- vi) Copy of obituary poster (if any)
- vii) Declaration of wish/evidence of nomination of next of kin

Dated this day of 200.....

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For MDA (Officer not below Director grade)

Initiated by:.....

Contact telephone:.....