

The Pensions Board Trust based RAC Registration Form

RAC Details

RAC Name

Commencement date

Renewal date:

Your Reference

Revenue Commissioners Approval

Date of Approval	<input style="width: 95%; height: 35px;" type="text"/>
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Revenue Commissioners Reference Number	<input style="width: 95%; height: 35px;" type="text"/>
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Membership

<u>Membership</u>	
Active based on number of members who paid contributions in the year preceding the current trust RAC year. In the year of commencement of a new trust RAC the membership will be “None” or “not applicable”	<input style="width: 95%; height: 80px;" type="text"/>

The name and address of the undertaking or undertakings (within the meaning of the Insurance Act 1989 (No. 2 of 1989)), if any, with whom all or part of the benefits are secured by means of one or more policies or contracts of insurance;

Details

Name	<input style="width: 95%; height: 25px;" type="text"/>
Address	<input style="width: 95%; height: 25px;" type="text"/>
	<input style="width: 95%; height: 25px;" type="text"/>
Telephone	<input style="width: 95%; height: 25px;" type="text"/>
Email	<input style="width: 95%; height: 25px;" type="text"/>
Any other Trading Names	<input style="width: 95%; height: 25px;" type="text"/>
Revenue P1 Number or Numbers	<input style="width: 95%; height: 25px;" type="text"/>

RAC Contacts

Primary RAC Contact for
Registration Enquiries

Name	<input style="width: 80%; height: 25px;" type="text"/>
Address	<input style="width: 80%; height: 25px;" type="text"/>
	<input style="width: 80%; height: 25px;" type="text"/>
Telephone	<input style="width: 80%; height: 25px;" type="text"/>
Email	<input style="width: 80%; height: 25px;" type="text"/>
Function *	<input style="width: 80%; height: 25px;" type="text"/>

Primary RAC Contact for Fee
payment Enquiries

Name	<input style="width: 80%; height: 25px;" type="text"/>
Address	<input style="width: 80%; height: 25px;" type="text"/>
	<input style="width: 80%; height: 25px;" type="text"/>
Telephone	<input style="width: 80%; height: 25px;" type="text"/>
Email	<input style="width: 80%; height: 25px;" type="text"/>
Function *	<input style="width: 80%; height: 25px;" type="text"/>

RAC Administrator

Name	
Address	
Telephone	
Email	
Function *	

* Life Office, Consultant, Broker, Employer, Administrator.

RAC Trustees

Name	
Address	
Telephone	
Email	

Name	
Address	
Telephone	
Email	

Name	
Address	
Telephone	
Email	

Name	
Address	
Telephone	
Email	

Life Office

Company Name	
Contact Name	
Address	
Telephone	
Email	

Consultant/ Broker Details

Company Name	
Contact Name	
Address	
Telephone	
Email	

RAC Auditor

Company Name	
Contact Name	
Address	
Telephone	
Email	

Declaration

I declare that the information given in this form is correct to the best of my knowledge.

The RAC has been approved by the Revenue Commissioners under Part 30, Chapter 1 of the Taxes Consolidation Act 1997 or is exempt from Approval (Delete as appropriate)

Signed : _____ Date: _____

Name: (Block capitals)	
Status	
Address	
Telephone Number	
Email address	

Declaration must be signed by a Trustee or a person authorised on a Trustee's behalf.

Notes on Completion of Form & Registration Process

Each application must have prior Revenue Approval under Part 30, Chapter 1, Taxes Consolidation Act, 1997 .

All sections of the form must be completed in full. “None” or “Not Applicable” should be entered where appropriate.

Blank spaces, unless indicated as appropriate, or “to be advised” are not acceptable and will result in the application being rejected as incomplete

Ticks should be used where appropriate.

Where there is insufficient space on the form a separate sheet may be used as necessary.

The RAC trustees are responsible under the Pensions Acts for ensuring that the RAC is registered with the Pensions Board and the form must therefore be signed either by them or a person authorised to do so on their behalf, Furthermore, the scheme trustees must ensure that the Pensions Board is notified of any subsequent change in the registration details within twelve months of this occurrence.

This form should be submitted to: The Pensions Board, Registration Unit, Verschoyle House, 28/30 Lower Mount Street, Dublin 2,

Pensions Board fees must not be remitted with this form. Fees will be levied upon registration, and an invoice issued with the Board’s acknowledgement of registration.

For further information visit WWW.PENSIONSBOARD.IE