

Firefighters' Pension Scheme 2015

Starter Form

Please Complete Immediately
To Protect Your Benefits

Pensions Helpdesk 0300 323 0260

email: askpensions@localpensionspartnership.org.uk

Notes for Guidance

Welcome to the Firefighters' Pension Scheme 2015.

We have sent you this form in order that you can tell us about any pension rights that you may have with other employers or bodies.

Please fill it in now or you could lose out on valuable benefits.

Please read the following notes before completing all sections of this form.

Section A ~ Personal Details

Please provide full and accurate information including your National Insurance number and date of birth.

Previous surnames may be required in order to find previous pension rights.

Section B ~ Pension Scheme Election

The Firefighters' Pension Scheme 2015 is a very valuable benefit, and you should think very carefully before deciding whether or not to be a member. Remember, if you decide not to join the pension scheme, you are making a choice which will not only affect your pension rights, but also those of your spouse, children or other dependants in the event of your death. If you want further information on these benefits, please call the Pensions Helpdesk on **0300 323 0260**.

Section C ~ Previous Pension Rights

It is essential that you let us know about any other pensionable service you may have, a personal pension or any other pension arrangement.

Please give us as much information as possible; if you have copies of correspondence from your previous pension arrangement you may find it easier to forward such copies.

Note

Please note you only have 12 months from the point you join the scheme to transfer any previous pension rights. You will not be given the opportunity to transfer after this period unless your employer allows an extension to this 12 month deadline.



Firefighters' Pension Scheme 2015

Section A ~ Personal Details

Employer	
Full name	
Whole time duty system	Retained duty system
Pay ref No.	
Place of work	
Date of appointment	
National Ins. number	Date of birth
Marital status	Single / Married / Divorced / Civil Partner / Judicially Separated / Widowed (Please delete as appropriate)
Previous Surname(s)	

Section B ~ Pension Scheme Election

Under the current Regulations all firefighters are automatically members of the Firefighters' Pension Scheme 2015 unless they elect **not** to be a member. If you do not wish to be a member please download and complete the opt-out form from the firefighters' section (2015 scheme) of the website

www.yourpensionservice.org.uk

Please complete the section over the page in respect of previous pension rights and ensure you sign and date the form before emailing it to: askpensions@localpensionspartnership.org.uk or alternatively if you wish to return it by post then please visit www.yourpensionservice.org.uk to find the relevant correspondence address.

Please Turn Over

Section C ~ Previous Pension Rights

It is important that you tell us, in the following section, if you have any previous pension rights that you may be interested in transferring. By filling in this section, you are only stating that you are interested in transferring; a transfer will not actually proceed until you have been given further information. Remember, transfers can be made not only from other employers' pension schemes, but also from personal pension type schemes.

Previous Pension Scheme Membership

Employing Body	Job Title	Period of Employment	
Name and Address		From	То

Personal Pension Type Policies

(Please use additional sheets where necessary.)

Personal Pension Scheme	Policy Number/s	Approximate Dates	
Name and Address		From	То

Tick this box if you do not have any previous pension rights. Please see note under Section C.

Please note that it may be a while before we receive the necessary information from the previous pension arrangement, therefore it may take a little time before we contact you.

I certify that the above particulars are correct and, if details of a transfer value are required from the bodies mentioned above, <u>I give authority for Your Pension Service to request and obtain the necessary information from the appropriate body.</u>

Firefighter's signature	Date	
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