

Dear Colleague

THE LOCAL GOVERNMENT PENSION SCHEME (LGPS)

You have automatically been entered into the LGPS. Please visit our website at www.suffolkpensionfund.org to find out more about the Suffolk Pension Fund, and the benefits of being a member, including:

- A secure pension at retirement
- Benefits in the event of ill-health retirement
- Family benefits e.g. Death in service grant of 3 x your annual salary
- Contributions towards your retirement paid by your employer
- Tax relief on pension contributions

If you have previous pension benefits, please complete the enclosed form and return it to the Pensions Team. This information is essential to ensure that your pension entitlements are determined correctly.

If you already have membership in the LGPS you should make us aware of this using the form provided. We will then write to you setting out the options available to you.

If you have any previous pension rights outside of the LGPS you can use the enclosed form to request that we investigate a transfer into the LGPS. A request to transfer your previous pension rights must be made within twelve months of joining our scheme. We will obtain transfer details from your previous provider, and we'll then write to you to show you what LGPS benefits your transfer could provide. At that stage we will ask you to confirm whether or not you wish the transfer to go ahead.

Please note you will need to ensure this form is signed by hand and returned to us, either by post or emailing a scanned copy to pensions@suffolk.gov.uk, as some pension providers will not accept an electronic signature.

This form must also be completed and dated on or after your commencement of employment in this role.

If you do not wish to be a member of the LGPS you can opt out by completing an opt out form. This can be downloaded from our website. Refunds of contributions are not allowed once you have accrued two years membership across all LGPS funds.

If you have already opted out of the scheme, or do not have any previous pension rights, please disregard this letter.

Yours sincerely

Pensions Team

Email: pensions@suffolk.gov.uk Tel: 03456 053000

FAILURE TO COMPLETE THIS FORM CORRECTLY COULD JEOPARDISE ANY FUTURE BENEFIT ENTITLEMENT

PREVIOUS LGPS MEMBERSHIP

Please provide details of all previous LGPS membership. Your options regarding combining your benefits will be sent to you in due course.

Dates		Employer – Name & Address	Contributions Refunded? Y/N	Pension in Payment? Y/N
From	To			

If you were previously a member of the LGPS were you paying increased contributions? **YES/NO**
 If **YES**: additional amount paid: _____ / additional percentage paid: _____%

OTHER PREVIOUS PENSION SCHEME MEMBERSHIP

Please provide details of all other previous pension scheme providers. If you wish to transfer any of these into the LGPS please sign the declaration below. N.B. If a transfer of your pension rights is to proceed it will be necessary for me to know your marital status.

Dates		Name & Address of previous employer Pension Scheme provider	Investigate Transfer? Y/N	Post Held/Policy No
From	To			

Have you contributed to an Additional Voluntary Contribution (AVC) Scheme? **YES / NO** If **YES** please give details below:

Dates		Name & Address of AVC Provider	Investigate Transfer? Y/N	Post Held/Policy No
From	To			

Declaration: I wish to investigate the possibility of transferring the pension rights indicated on this form and authorise Suffolk County Council to obtain any necessary details from my previous scheme administrator.

Full name: <i>(Capital letters only)</i>		National Insurance Number:	
Address:		Date of birth:	
Employer Name:		Marital Status:	
Signed: <i>(By hand only)</i>		Dated:	

PLEASE RETURN THIS FORM TO:
pensions@suffolk.gov.uk

or

Pensions Section, Floor 3 Gold, Endeavour House, 8 Russell Road, Ipswich, Suffolk, IP1 2BX