

## Details of Benefits from other Registered Pension Schemes form

**LGPS 12**

MEMBER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ N.I. NUMBER: \_\_\_\_\_

If you have reached age 55 (or, in the case of a woman who has a Guaranteed Minimum Pension [GMP], is aged 60 or over, or in the case of a man who has a GMP, is aged 65 or over), and either your pension benefits from all sources (excluding the State Old Age Pension), or your total pension benefits held in the LGPS, are below limits laid down by H.M. Revenue & Customs, you may be able to elect to receive a one-off payment in exchange for any future pension payments from the LGPS.

[To have a GMP you must have been a member of a Contracted-out pension arrangement between 6 April 1978 and 5 April 1997 to which the benefits payable relate to.]

### Why do I need to complete this form?

In order that the Pensions Department can decide whether or not you are eligible to receive a one-off payment in exchange for any future pension payments from the LGPS. You **must** declare all pension entitlements (**excluding** state pensions and any dependant's pension that you may be in receipt of) that you have, this includes:

- current membership of any pension arrangement
- a refund that has not been claimed
- a deferred benefit (a benefit that is not yet in payment)
- a pension or pensions in payment
- a pension credit
- any trivial commutation payments that you have received since 6 April 2006

## PART A

Please tick all boxes that apply and then complete the required parts **overleaf**.

☐ I have ☐ I have not transferred pension rights out of the LGPS within the last 3 years.

☐ I am ☐ I am not a controlling director, or someone connected to a controlling director, of an employer that participates in the LGPS in England or Wales.

☐ I am in receipt of and/or have other pension benefits that have either already come into payment, or will come into payment on my LGPS retirement date. *Please complete Parts B and C overleaf where appropriate. Please note that we **do not** require any details regarding any State pension benefits or dependants/spouse benefits. Please also sign and date Part E overleaf.*

☐ I **do not** currently receive any pension benefits from any other pension arrangements, and no other pension benefits will commence on the date of my LGPS retirement. *Please see notes overleaf and complete Part C where appropriate. Please note that we **do not** require any details regarding any State pension benefits or dependants/spouse benefits. Please also sign and date Part D.*

☐ I have previously commuted pension benefits for a one-off lump sum. *Please complete Part D overleaf and also sign and date Part E.*

## PART B

**Pensions already in Payment before 6 April 2006** - If you were receiving a pension from any source (excluding any state pensions) that started before 6 April 2006, please tell us how much your annual pension was as of 6 April 2006, before any tax deductions.

Name of pension scheme/provider	Annual pension before tax as of 6 April 2006
	£
	£
	£

**Pensions which commenced after 5 April 2006** - Please enter the annual amount of pension you are currently receiving from other sources before any tax deductions, plus details of any lump sum payment you received in respect of this pension. If you do not have this information you should contact your pension provider.

Name of pension scheme/provider	Annual pension before tax	Date of retirement	Lump Sum of
	£		£
	£		£
	£		£

## PART C

**Pensions from other arrangements that have not yet come into payment, including other Local Government Pension Scheme benefits** - Please enter details of any other pension benefits you hold elsewhere that have yet to come into payment. Your pension provider will be able to provide you with the current value and percentage of lifetime allowance used.

Name of pension scheme/provider	Current Value of pension/ AVCs
	£
	£
	£

## PART D

**Pension Benefits already commuted for a one off lump sum**

Name of pension scheme/provider	Date of lump sum payment

## PART E - Declaration

I certify that the information I have provided is correct and complete to the best of my knowledge. If any of the information provided is proven to be incorrect then I understand that I will be wholly and personally liable for any tax changes due and any resultant penalty as may be imposed by His Majesty's Revenue and Customs.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**Avon Pension Fund, Local Government Pension Scheme administered by Bath & North East Somerset Council.**

**Data Protection:** Avon Pension Fund is a Data Controller as defined in the UK GDPR. We store, hold and manage your personal data in line with statutory requirements to provide you with pension administration services. For more information about how we process your data, your individual rights and answers to frequently asked questions, please visit our website: [avonpensionfund.org.uk](http://avonpensionfund.org.uk)