

**NEW
LOCAL
GOVERNMENT
PENSION
SCHEME
REGULATIONS
1 APRIL 2014**

**NOTIFICATION OF
COHABITING
PARTNER
FOR
SURVIVOR'S
PENSION**



Pensions Section,
Gloucestershire County Council,
Shire Hall, Gloucester GL1 2TG
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COHABITING PARTNER FOR SURVIVOR'S PENSION FROM APRIL 2014 EXPLANATORY NOTES

Benefits payable on the death of a member of the Local Government Pension Scheme (LGPS) include pensions for children, for a surviving spouse or civil partner¹ and, provided the scheme member paid into the LGPS on or after 1 April 2008, for a nominated cohabiting partner.

From April 2014 a survivor's pension will automatically be payable to a co-habiting partner, provided they meet the qualifying conditions for a survivor's pension at the time of death. The qualifying conditions are provided below – Please also see the note in bold below.

The following information has been provided so as you understand the qualifying conditions which must be met, in order for your co-habiting partner to be eligible to receive a survivor's pension, should anything happen to you.

A 'cohabiting partner', is a person of either opposite or same sex, with whom you have not entered into marriage or formed a civil partnership and the following conditions have been met:

The conditions are that for a continuous period of at least two years prior to your death:

- both you and your nominated co-habiting partner are, and have been, able to marry each other or form a civil partnership with each other, and
- you and your nominated co-habiting partner have been living together as if you were husband and wife, or civil partners, and
- neither you or your nominated co-habiting partner have been living with someone else as if you/they were husband and wife or civil partners, and
- either your nominated co-habiting partner is financially dependent on you or you are financially interdependent on each other².

On your death, a survivor's pension would be paid to your co-habiting partner if:

- your cohabiting partner satisfies us that the above conditions had been met for a continuous period of at least 2 years immediately prior to your death.

You and your co-habiting partner should be aware that in the event of your death, we would require that your partner is able to verify that the conditions listed above have been satisfied. Some examples of how your partner may be able to do this, are by their being able to prove that you both lived in a shared household with shared household spending and/or demonstrate that you had a joint bank account and/or mortgage. It is therefore extremely important that your personal affairs and finances are organised in such a way that will allow your partner to demonstrate the above requirements to a satisfactory level.

There would be a right of appeal if we decide not to pay a pension and your partner believes that he/she has entitlement.

Although you are not required to make a written nomination for a co-habiting partner, we would suggest that you complete this form to provide this office with additional details to assist us when deciding whether the criteria for a survivor's pension are met should a cohabiting partner's pension need to be paid.

¹ A civil partnership is a relationship between two people of the same sex ("civil partners"), which is formed when they register as civil partners of each other.

² Your partner is financially dependent on you if you have the highest income. Financially interdependent means that you rely on your joint finances to support your standard of living. It doesn't mean that you need to be contributing equally. For example, if your partner's income is a lot more than yours, he or she may pay the mortgage and most of the bills, and you may pay for the weekly shopping.

THE LOCAL GOVERNMENT PENSION SCHEME

NOTIFICATION OF COHABITING PARTNER FOR A SURVIVOR'S PENSION

YOUR DETAILS

Surname

Forename(s)

Date of birth National Insurance No.

Home Address.....

.....Post Code.....

Employer Employee Payroll Number.....

PARTNER'S DETAILS

Surname Title (*Mr, Mrs, Ms, Other*)

Forename(s)

Date of birth National Insurance No.

Home Address

.....Post Code.....

Scheme member's signature

Date

Please return your completed form to:

The Pensions Section,
Gloucestershire County Council,
Shire Hall,
Westgate Street,
Gloucester
GL1 2TG.

For any queries please contact:

Pension helpline phone number: 01452 328888
e-mail: pensions@gloucestershire.gov.uk
website: www.gloucestershire.gov.uk

Please note: on your death, we will need to be satisfied that your relationship meet the qualifying conditions for the payment of a Survivor's pension, as detailed overleaf.