

MEMBER LEAVER FORM: EXPLANATORY INFORMATION

You have been provided with this form by your employer as you have either left an employment or opted out of the pension scheme, ending your active LGPS membership in all or one of your eligible contracts. If you have more than one job (continuing membership), your pension from the job that has ended will be transferred automatically to your continuing pension account. You will be contacted in due course if we require you to make an election regarding these employments.

➤ **If you built up less than 2 years LGPS membership** you are entitled to a frozen refund (which can be held frozen for up to 5 years) and you will receive a statement confirming this in due course. You may also have the option to transfer your benefits or claim your refund.
(Please read/complete options 1 or 3 or wait for the statement)

➤ **If you built up more than 2 years LGPS membership** you are entitled to a deferred pension and you will receive a statement in due course. You may also have the option to transfer your benefits, or if you are over 55 you can elect to claim your deferred pension at a reduced rate.
(Please read/complete option 2 or 3 or wait for the deferred statement)

You will receive a statement of entitlement (or benefits aggregated together) in due course there is no need to complete this form if you are happy to wait for your statement.

Further information regarding your options on leaving before retirement can be found at
www.gloucestershirepensionfund.org.uk/members/leaving
Please read before completing the leaver form.

Please return your completed form to the email address below

MEMBER LEAVER FORM – DECISION REQUIRED

PERSONAL DETAILS																	
Full Name						Title											
Home Address:						<input type="checkbox"/> Mobile											
						<input type="checkbox"/> Home											
						<input type="checkbox"/> E-Mail											
Date of Birth (verification needed)								Ni No									
Date of Leaving																	
Employer & Pay No/Job Title																	
Partnership Status																	
1. Single		2. Married		3. Civil Partnership		4. Divorced		5. Widowed									
6. Dissolved Civil Partnership				7. Co-Habiting partner													
Partners Full Name										Partners DOB							
Date of marriage/civil partnership																	

1. CLAIMING REFUND OF CONTRIBUTIONS (Under 2 years membership)

Please only complete and sign to receive a refund of contributions if you are eligible to do so. If we receive your request for a refund of contributions and you are ineligible, we will contact you. Please be aware that a tax amount of 20% will be taken from the refund, as required by HMRC.

Bank/Building Society Name														
Branch Address														
Sort Code						Account Number								
Roll Number (if applicable for certain Building Societies)														
SIGNED								Date						

2. CLAIMING DEFERRED BENEFITS (Over 55 & Over 2 years membership)

Please tick the box if you are over the age of 55 and wish to investigate receiving your pension benefits

☐

Signed

Dated

3. TRANSFER OF PENSION RIGHTS

Please tick if you wish to investigate a transfer out

Yes

☐

No

☐

If **Yes**: Please contact your new pension provider as they will need to contact the pension office to request a *cash equivalent transfer value* to enable the investigation of a transfer to progress. Please complete the section and sign below to enable us to respond to your new pension provider, If **No** please leave the section blank:

Name of new pension provider

Contact details

Signed

Dated

PLEASE NOTE: If the total value of your LGPS benefits is more than £30,000 and you want to transfer to a defined contribution pension scheme, such as a personal pension scheme, you are legally required to take appropriate independent advice at your own cost.