Local Government Pension Scheme Membership Questionnaire Form LGPS-1





Use this form to confirm that you wish to join the pension scheme.

You can also tell us whether you want to transfer other pension rights into the scheme, and nominate beneficiaries in the event of your death.

Before completing this form please read the guidance notes at the end.

1. Personal det	ails									
Surname										
Forename(s)										
National insurance number										
Home address										
					Post c	ode				
Telephone number/s										
Email address										
Please indicate your marital/pa			artr	nership status	by marking on	e bo	x:			
Single Married			Civil partnership Civil partnership dissolved							
Widow/er	Divorced [			Surviving civil partner   Cohabiting partner			ner			
Date status changed (if applicable)				Previous surname (if applicable)						
Please enclose your birth certificat				ate, which will	be returned to	you	imme	diately		
Date of birth				Birth certificate enclosed? Yes No No						
2 Employment details										
Employer			Payroll no:							
Date employment commences/commenced										
Job title										

3. Election to join the Local Government Pension Scheme (LGPS)					
Please tick <b>one</b> of the following boxes (if appropriate to your circumstances):					
I am a new employee and I wish to join the LGPS from my date of starting.  I authorise the deduction of a pension contribution from my salary at the appropriate rate.					
I am an existing employee and I wish to opt-in to the LGPS from the next available payroll.  I authorise the deduction of a pension contribution from my salary at the appropriate rate.					
Date	Signature				
4. Previous pension arrangements					

Pension scheme members should list all previous pension schemes, which they are considering transferring into their LGPS scheme. We will investigate whether a transfer is possible and let you know the details. You can then decide whether to make the transfer.

Please list your previous pension schemes in date order, with the most recent at the top.

Name and address of scheme administrator	Type of pension scheme	Period of schemembership	eme	If a personal or stakeholder pension please provide policy/scheme number	
or insurance company		From	То		

Pension scheme members should enclose all formal notifications, policies or documents relating to any other pension schemes to which they belonged with their completed form. They will be treated in strictest confidence and returned to you after all relevant detail has been recorded.

5. Previous Local Government	Pension Scheme (LGPS) membership		
Have you previously paid into the	LGPS?	Yes	No 🗌
If Yes were you paying additiona Pre 2014 membership only	contributions to purchase 'added years'?	Yes 🗌	No 🗌
pays that pension and inform to receiving a pension in respe employment and you re-join an	pension from the LGPS you must write to them that you are again eligible to join the loct of any previous Local Government Foundaries that offers the LGPS (regardless from may be reduced or suspended.	LGPS. Pensioi	If you are n Scheme
6. Death grant – expression of	wish		
	of its discretion in the payment of lump-sum de ath benefit due under the Pension Scheme Req		
Name	Relationship	F	Proportion *
			%
			%
			%
			%
Should you wish to nominate addi	tional beneficiaries, please continue on a separ	rate she	et.
* The total of the proportion of ben	efits must equal 100%.		
7. Declaration			
To the best of my knowledge and	belief the details supplied on this form are accu	ırate an	d complete
Date			
Signature			
Please return the completed form	to ESCC, Pensions Team, PO Box 2681, Uckfi	ield. Ea	st Sussex.

Please return the completed form to ESCC, Pensions Team, PO Box 2681, Uckfield, East Sussex TN22 1WT or to your employer.

All information will be treated in strictest confidence.

#### **Guidance notes**

The East Sussex County Council Pension Scheme is part of the Local Government Pension Scheme (LGPS). It provides pension benefits for employees of various councils and public authorities across East Sussex.

The purpose of this form is for staff of employers who are participating in the East Sussex County Council Pension Scheme to let us know whether they want to:

- Join the pension scheme
- transfer other pension rights into the scheme
- nominate a beneficiary on the event of your death.

#### Joining the Local Government Pension Scheme (LGPS) for the first time

If you are under age 75 and have a contract of employment for a minimum of 3 months you will become a member of the scheme automatically, unless you opt not to do so. Although membership is automatic, it is important that you complete and return this form. You can also elect to join the scheme if you do not have a contract of employment for a minimum of three months.

Please note that once you have completed 2 years scheme membership you will qualify for retirement benefits and will not be permitted to claim a refund of contributions.

# **Opting out of the LGPS**

You may opt to leave the LGPS at any time, although you are recommended to obtain advice before making such a decision. Once you have completed two years scheme membership or have transferred other benefits into the LGPS you will qualify for retirement benefits and will not be permitted to claim a refund of contributions. An opt out form can be obtained from the scheme administrators.

If you opt out, you can re-join the LGPS at any time, but you are required to complete a new LGPS-1 form within three months of the date of starting.

## Rejoining the LGPS

If you wish to consider combining a previous period of LGPS membership you must elect to do so within 12 months of rejoining the LGPS, or such longer period as your employer may allow. Under certain conditions, membership from a previous employment is automatically aggregated unless you elect to retain separate benefits, again within 12 months of rejoining.

The pension scheme administrators will provide you with information in order to assist you in making a decision.

Whether or not you decide to combine LGPS membership periods, your decision will be irrevocable, and you will not be able to change it at a later date.

# Transferring pension rights from non-LGPS pension schemes

The LGPS can accept a transfer of pension rights from most pension schemes and we can investigate this option for you. You will not be committing yourself to anything at this time and full information will be provided to you throughout the transfer process.

You will have 12 months from the date of joining the LGPS, or such longer period as your employer may allow, to decide whether you wish to transfer any previous pension rights.

You should seek independent financial advice on the best course of action to take if you are currently paying into a personal or stakeholder pension arrangement.

#### Death grant - expression of wish

The rules of the LGPS allow for the payment of lump sums on the death of a scheme member in certain circumstances. Whilst the County Council has absolute discretion as to who to pay such a lump sum to, you can let us know who you would like this paid to. The nominated beneficiary can be a relative, friend, or an organisation such as a club or charity. You can nominate more than one beneficiary.

You may revise your nomination at any time by completing Expression of Wish Form DG1.

### **Annual pension benefit statement**

Each year we will provide you with an annual pension benefit statement, setting out a summary of the benefits you have earned in the LGPS. We can also include details of your state pension entitlement.

If you would like us to include information about your state pension in your benefit statement, we need first to tell the Department of Work and Pensions (DWP) your surname or family name, forenames, sex, date of birth and national insurance number. The DWP will then be able to tell us about the state pension you have earned so far, what your state pension is likely to be when you retire and the age at which you can get state retirement pension. The information we get from the DWP will be used only for the purposes of providing you with a forecast of your pension rights.

Please read appendix B(a) opt-out which is enclosed with this form. If you object to us giving the DWP your details, please return the tear off slip. You retain the right to change your mind at a later date by contacting the pension administrator, ESCC.

# Nomination of Cohabiting Partner for Survivor's Pension-

The LGPS allows you to nominate a cohabiting partner. However, to be able to make a nomination, all of the following conditions must have applied to both you and your nominated co-habiting partner for a continuous period of at least 2 years on the date you both sign the nomination form:

- both you and your nominated co-habiting partner are, and have been, free to marry each other or enter into 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 other.

Full details and a nomination form are available online at <a href="https://www.eastsussexpensionfund.org">www.eastsussexpensionfund.org</a> Alternatively you can contact the ESCC Pensions Team at the address shown below.

# **Further information**

Should you require further information about the Local Government Pension Scheme, please refer to the employee's guide, available online at www.eastsussexpensionfund.org. Alternatively, you may contact the pension scheme administrators, at:

Pensions, Business Operations, East F, County Hall, St Anne's Crescent, Lewes, East Sussex, BN7 1UE

Pensions helpline: 01825 744544

Email: escc.pensions@sesharedservices.org.uk

# <u>Appendix B(a) – State Pension Forecast Opt-out</u> <u>Your Annual Pension Statement</u>

<b>Local Government Pension Scheme</b>	
Administered by ESCC	

#### Dear scheme member

We would like to include information about your State Pension in the Local Government Pension Scheme annual statement we will be sending you. This will give you a clear picture of the income you are likely to receive in retirement and help you decide whether you need to save more.

The law requires us to ensure that you do not object before we exchange information with The Pension Service, part of the Department for Work and Pensions.

So that The Pension Service can identify the correct National Insurance account we will give them your:

- surname or family name;
- first name or initial;
- sex;
- date of birth:
- National Insurance number

The Pension Service will then give us:

- an estimate of the amount of State Pension you may get at State Pension age, based on your contribution record so far:
- an estimate of the amount your State Pension is likely to be when you reach State Pension age.
- the earliest age at which you can receive your State Pension.

We will use the information we get from The Pension Service to send you a forecast of your State Pension entitlement, combined with your Local Government Pension Scheme entitlement if you are a scheme member. We will continue to send you forecasts for as long as you are a member of the pension scheme or employed by this company. The information will not be used for any other purpose.

If you are happy for us to exchange the information shown above with the Pension Service, **you do not need to do anything**. If you do not want to receive a State Pension forecast please fill in and return the attached tear-off slip or reply by e-mail to escc.pensions@sesharedservices.org.uk. If you are a Scheme member you will still receive your next annual benefit statement, but it will not include any information about the State Pension. Whatever you decide, if you change your mind at a later date you should contact the Pensions Team at ESCC and tell them of your decision.

I do not want ESCC to give me a State Pension forecast.

Your name	
National Insurance number	
Your signature	
Date	