

Before you complete this form, please ensure you have read the starter information booklet found in the forms section of our [website](#).

This is for use once your employer has opted you into the LGPS pension scheme. Please complete **all** sections and send it to Hampshire Pension Services. If you have joined the LGPS in more than one employment, please complete a separate form for each one.

1 Personal details

Please send a photocopy of your birth certificate or passport with this form. If you no longer use the name on your birth certificate or passport, please also send something to prove your current name, such as your change of name deed or marriage certificate.

Title _____ First name(s) _____ Surname _____

Address _____

Postcode _____

National Insurance number

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

Date of birth _____ / _____ / _____

Email address _____ Daytime telephone _____

2 Partnership status

Please select your current partnership status and send copies of any documentation to verify this.

- Married Civil partner Cohabiting partner
- Single Divorced Civil partnership dissolved

Date effective from: _____ / _____ / _____

3 Current employment

Tell us about the employment that this pension membership relates to, including your personnel or pay reference if you know it. Please complete as much information as known.

Name of employer _____

Post or job title _____

Date joined LGPS _____ / _____ / _____ Payroll number _____

4 Previous LGPS/public service scheme membership

Please let us know if you have previously been a member of the LGPS or any public service pension scheme. This is for information only and is NOT an election to transfer benefits.

Please complete Form B to confirm if you wish to combine or keep separate any previous LGPS membership within one year of joining the scheme.

Please complete the Transfer Booklet if you wish to investigate the transfer of any non LGPS pensions.

| Employer's name | Pension fund's name and address | Dates paid in | |
|-----------------|---------------------------------|---------------|----|
| | | From | To |
| | | | |
| | | | |
| | | | |

Declaration and authority

Please sign and date the form to confirm that the information you have given is correct and you consent to us contacting any other pension funds you have listed and sharing necessary information with them.

We can only accept forms that are signed and dated on or after the date your employer enrolled you into the LGPS.

The details in this form are correct to the best of my knowledge.

I have included a clear photocopy of the documents as requested in sections 1 and 2.

Signature

Date

Date cannot be earlier than the date you joined the LGPS in this employment

Please return the completed form to:

Hampshire Pension Services, The Castle, Winchester, SO23 8UB.

Privacy Notice

For information about how we hold your data, who we share it with and what rights you have to request information from the Pension Fund, please visit:

<https://www.hants.gov.uk/hampshire-services/pensions/local-government/contact-and-resources/privacy-notice>

or ask us to send you a printed copy.

**FORM B: Combining previous
LGPS pensions**

Before you complete this form, please ensure you have read the starter information booklet found in the forms section of our [website](#).

Please use this form to confirm whether your previous LGPS accounts should be combined or left separate from your new account. You must return this form to Pension Services within a year of starting this current period of LGPS membership, unless the employer liable for the LGPS account has a policy to allow longer. Please refer to the starter information booklet for further guidance on combining membership.

| I Personal details | | | | | | | | | | | |
|---------------------------|---|--|--|--|--|--|--|--|--|--|--|
| Title _____ | First name(s) _____ Surname _____ | | | | | | | | | | |
| Address _____ | | | | | | | | | | | |
| Postcode _____ | | | | | | | | | | | |
| National Insurance number | <table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table> | | | | | | | | | | |
| | | | | | | | | | | | |
| Date of birth | ____ / ____ / ____ | | | | | | | | | | |
| Email address _____ | Daytime telephone _____ | | | | | | | | | | |
| Employer _____ | Payroll number _____ | | | | | | | | | | |

| 2 Your previous LGPS pensions (please refer to notes pages 5 – 8) | | | |
|--|--------------------------------|------------------------------|--|
| Pension 1 - About your previous LGPS pension | | | |
| Previous LGPS Scheme Name & Address | Date membership started | Date membership ended | Status at leaving (deferred/pensioner/transfer) |
| | | | |

Your decision: I have read this booklet and scheme guide and have made the following decision:

- Please keep this pension separate from my new LGPS pension account
- Please combine this pension with my new LGPS pension account

Pension 2 - About your previous LGPS pension

| Previous LGPS Scheme Name & Address | Membership of scheme from | Membership of scheme to | Status at leaving (deferred/pensioner/transfer) |
|-------------------------------------|---------------------------|-------------------------|---|
| | | | |

Your decision: I have read this booklet and scheme guide and have made the following decision:

- Please keep this pension separate from my new LGPS pension account
- Please combine this pension with my new LGPS pension account

3. Declaration and authority

Please sign and date this form to confirm that information you have given is correct and that:

- you have read this booklet and the scheme guide before making your decision
- you have listed all your previous LGPS pensions and made a decision about them
- you consent to us contacting the other pension funds you have listed
- I understand that I cannot change the decision I have made once Hampshire Pensions Services has received and processed the form.

Signature

Date

Please return the completed form to:

Hampshire Pension Services, The Castle, Winchester, SO23 8UB.

Privacy Notice

For information about how we hold your data, who we share it with and what rights you have to request information from the Pension Fund, please visit:

<https://www.hants.gov.uk/hampshire-services/pensions/local-government/contact-and-resources/privacy-notice>

or ask us to send you a printed copy.