ITB PENSION FUNDS

ADDITIONAL VOLUNTARY CONTRIBUTIONS (AVC) Notification of Change Form

Use this form if you would like to:

• Start paying additional voluntary contributions

(Complete Sections 1, 2 and 5)

• Change how much you pay

(Complete Sections 1, 4 and 5)

• Stop paying additional contributions

(Complete Sections 1, 3 and 5)

Any changes affecting how much you pay in additional voluntary contributions will take place on the next available payroll run (unless you advise a later date of commencement).

1. About you

Miss/Mrs/Ms/Mr/Other:	Surname:	Forenames
Date of Birth:	National Insurance Number:	Employer:



2. Start paying AVCs

Please complete this section if you would like to **start** paying AVCs, either as a monthly amount or as a one-off payment. When making a decision about making AVCs please be aware of the Annual Allowance as described in the ITB Pension Funds Member Booklet found on www.itb-online.co.uk AVCs paid, either as a regular amount or as a one-off payment, may not exceed 20% of your salary.

Making regular payments

I wish to start paying AVCs to the ITB Pension Funds AVC Provider (L&G) as a regular percentage of my Pensionable Salary of: ________ % of a month (this percentage in addition to your regular contribution percentage as shown in the ITB Member Booklet, found on www.itb-online.co.uk)._

I would like my AVCs to be deducted from my salary with effect from: _ (Your AVC's cannot exceed 20% of your salary).

Making a one-off payment

I wish to make a one-off lump sum AVC payment to the ITB Pension Funds AVC Provider (L&G) of: \pm ______ (Your AVCs cannot exceed 20% of your Pensionable Salary, including any current regular contribution made or a one-off payment previously paid during the current Scheme Year (1 April – 31 March)).

I would like this one-off payment to be deducted from my salary with effect from: _

If you are starting to make AVCs then this form should be completed along with Section A of the AVC Investment Choice Form, advising us how you would like your AVCs to be invested.



3. Stop paying AVCs

Please complete this section if you would like to **stop** paying AVCs.

I wish to stop paying AVCs as soon as possible after:

4. Change your payment

Please complete this section if you would like to **change** the amount of your AVCs.

I wish to change the amount I pay in AVCs to: ______% a month (cannot exceed 20% of pensionable salary).

I would like my AVCs to be deducted from my salary with effect from: ____

5. Confirmation

I authorise my Employer and the ITB Pension Funds to carry out my instructions as set out in this form. I understand that my instructions will take effect as soon as possible upon receipt of my completed form.

The ITB AVC arrangement is currently administered by Legal & General Assurance Society Limited (L & G). By signing this form I acknowledge that my Employer and/or the ITB Pension Funds will pass certain personal data it collects about me to L & G, which might reasonably be required by them to manage my AVC fund. L & G will hold and process my personal data for those purposes as the data controller and any enquiries concerning the processing of my personal data in connection with the ITB AVC arrangement should be sent to: L & G at Legal & General Assurance Society Limited, City Park, The Droveway, Hove, BN3 7PY.

Signed:	_ Date:	
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Member Action: Please pass this form to your HR Department.

Employer Action: Please amend your records immediately and forward this form to The ITB Pension Funds' Office.

