

Please complete this form using Adobe Acrobat Reader and then print it, sign it and return it to us. Press 'Tab' key to move between fields. Compulsory fields are marked in red.

## **LEAVER'S FORM (OVER 2 YEARS SERVICE)**

## **HOW TO COMPLETE THIS FORM**

Employer to complete and return to the Pension Funds' Office, 23 King Street, Watford, Herts WD18 0BJ to advise of member ceasing membership of the pension scheme.

**EMPLOYER** 

#### 1. BASIC DATA

Member's Surname		Home Address
First Names		
National Insurance Number		
Date Member Contributions Ceased		
Date of Leaving (if applicable)		
Marital Status Married/Single/Divorced	d/Widow(er)/Civil Partnership	

## 2. SALARY DATA – SEE NOTES OVERLEAF

EFFECTIVE DATE	ANNUAL FULL-TIME EQUIVALENT PENSIONABLE SALARY	EFFECTIVE DATE	ANNUAL FULL-TIME EQUIVALENT PENSIONABLE SALARY

## 3. MEMBER CONTRIBUTIONS PAID IN CURRENT TAX YEAR - SEE NOTES OVERLEAF

	DEDUCTED	NOTIONAL PAID
		UNDER SALARY
		SACRIFICE
Normal		
AVC Money Purchase		N/A
AVC Added Years		

FORM 012 O2Y ISSUE 1 07/12



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<b>MEMBER</b>	NAME:	)
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# 4. HAS THE MEMBER EVER BEEN A PART-TIMER IF 'YES' SHOW PART-TIME HISTORY BELOW

EFFECTIVE DATE	PART-TIME HOURS	EFFECTIVE DATE	PART-TIME HOURS

#### 5. REASON FOR CEASING SCHEME MEMBERSHIP - PLEASE INDICATE

	REASON ✓		REASON /
A – Opting Out <sup>(a)</sup>		G – Compulsory Retirement (b)	
B – Resignation		H – Mutual Agreement (c)	
C – Redundancy		I – Normal Retirement	
<b>D</b> – Dismissal		J – Late Retirement	
E – Disability		K – Death in Service	
F – Early Retirement			

- a) In the case of A please attach form "Notice of Intention to Opt-Out" form
- b) In the case of G please attach form "Application for Compulsory Retirement Pension and Employer's Certificate".
- c) In the case of *H* please attach "Application for Immediate Payment of Augmented Pension before Normal Retirement Date".

#### 6. AUTHORISED OFFICER

Signed:	Name:	•••••
8		(In Block Capitals)
Designation:	Date:	•••••
Nomna		

## <u>NOTES</u>

#### i) SALARY DATA:

The data should cover the appropriate period ending on date contributions ceased, or full period of membership if this is less than that period as follows: - OLD SECTION - 12 months / NEW SECTION - 36 Months / 2007 SECTION - 72 months For those who are (or have been) part-time, their full-time equivalent salaries are to be shown.

#### ii) PENSION CONTRIBUTIONS:

In respect of the last pay period there should be  $\underline{NO}$  pension contribution deducted from holiday pay, payments in lieu of notice or liquidated damages on leaving service.

## iii) EXTRA EMPLOYER COSTS IN RESPECT OF RE-EMPLOYMENT OR OPT-OUT:

Substantial Employer costs can arise which are payable to the Scheme:

- If your employee leaves the Scheme and takes payment of their pension and is then subsequently re-employed by you on a contractual or self-employed basis; or
- If your employee opted-out from the Scheme and was granted a deferred pension, and whilst still employed by you in any capacity they take early payment of their deferred pension:.

It is important for you therefore to first contact the Funds' Office if such an instance is likely to arise.

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