

**London Borough of Lewisham
Local Government Pension Scheme (LGPS)**

PENSIONS OPTION FORM - NEW STARTERS

Under the Pension Scheme Regulations, unless you have a contract of less than 3 months, you will be automatically enrolled into the LGPS when your employment starts. Please fully complete this form.

Surname:		Forename(s)	
Title:		Date of Birth:	(Please enclose a photocopy of either your birth certificate or passport)
National Insurance Number:			
Home Address:			
Email Address			
Job Title		Date Employment Starts:	
Employment Location:			

Partnership Status (please tick one):	Single:	<input type="checkbox"/>	Married/Civil Partnership:	<input type="checkbox"/>
Co-Habiting:		<input type="checkbox"/>	Divorced:	<input type="checkbox"/>
			Widow/er:	<input type="checkbox"/>

Survivor Pensions are automatically provided to your spouse, civil partner and eligible co-habiting partner (subject to certain criteria). Further information can be found: www.lewishampensions.org

Details of any Previous Pension Rights

Please provide details of any previous pension rights you hold elsewhere, that you wish to investigate transferring to the Lewisham LGPS. When completing the section below please read the notes on the back of this form*

Name and Address of your previous pension provider:	Arrangement/Policy Number (if applicable):	Dates of Scheme Membership:	Action taken on leaving (eg: refund/transferred /deferred):

I authorise the London Borough of Lewisham, Pensions Team, to act on my behalf in connection with my previous pension rights. To my previous provider: please supply the Lewisham Pensions Team with all details they require in connection with my policy held with you.

Signed _____ Date _____

*Notes on transferring and investigating any transfers of previous pension rights to the Lewisham LGPS:

This form provides us with your authority to approach your previous pension provider to investigate the possibility of transferring to the Lewisham LGPS.

Previous LGPS pension rights:

If you have previously been a member of the LGPS with another Local Authority then you **MUST** declare all LGPS membership. In most cases your previous LGPS membership will be automatically linked to your current period of membership unless (within the first 12 months of re-joining the scheme) you make a written election to keep your benefits separate. We will contact the scheme administrators of your previous LGPS and once we have received the relevant membership details from them, we will write to you in order that you can make a decision on whether to transfer or to keep your benefits separate.

Non LGPS pension rights:

If you have previously been a member of any other type of pension scheme and you wish to investigate the possibility of transferring to the Lewisham LGPS, please complete the details of your previous pension scheme(s) in the space provided on this form. It is important that you fully complete the information requested as failure to do so may delay the option to investigate the possible transfer in. Please note that an election to proceed with a transfer (from non LGPS) must be made within 12 months of joining the Lewisham LGPS.

Expression of Wishes form:

Please ensure that you complete an 'Expression of Wishes' form to name a beneficiary (or beneficiaries) to receive any Death Grant that may become payable in the event of death. A copy of the form can be found at: <https://www.lewishampensions.org/media/5269/expression-of-wishes-form.pdf>

Please return your completed form together with a copy of your birth certificate or passport to:

London Borough of Lewisham
Pensions Team
4th Floor, Laurence House
1 Catford Road
London
SE6 4RU

020 8314 7277
pensionsteam@lewisham.gov.uk

For further information on the LGPS please visit: www.lgpsmembers.org

Information on planning your retirement can be found at :
<https://www.lewishampensions.org/media/5267/2020-retirement-planning-guide.pdf>

Information on AVC savings can be found at:
<https://www.lewishampensions.org/media/5265/avc-guide.pdf>

Privacy Notice:

In order to administer the pension scheme we collect, hold, process and share personal data. For further information please read our privacy notice:
<https://www.lewishampensions.org/media/3916/full-privacy-policy.pdf>

Internal Dispute Resolution Procedure (IDRP)

If you believe that there is any problem with your pension benefits, please contact us in the first instance. If we cannot resolve the issue you have the right to appeal in accordance with the Internal Dispute Resolution Procedure (IDRP).

At any stage The Pensions Advisory Service (TPAS) may be able to offer you advice. They are independent experts who offer a free service to help pension scheme members who experience problems. For their contact details please visit their website: www.pensionsadvisoryservice.org.uk



London Borough of Lewisham Local Government Pension Scheme (LGPS)

Expression of Wishes Form (Death Grant Nomination Form)

This form should only be completed by members of the Local Government Pension Scheme (LGPS) who wish to name a beneficiary (or beneficiaries) to receive any Death Grant that may become payable in the event of their death, under the Scheme Regulations. The purpose of making an expression of wish is to assist the London Borough of Lewisham in deciding to whom any payments can be made. Although the scheme administrators would want to comply with your wishes, they have absolute discretion in deciding where, or to whom, any payment is to be paid.

Although the named beneficiary can be your next of kin, you may name any person(s) or organisation of your choice and such requests would be considered by the Scheme Administrators. The main advantage in making an expression of wish is that the payment could be made directly to your chosen beneficiary without forming part of your estate. You can update your expression of wish at any time by completing another form.

To the London Borough of Lewisham - In the event of my death it is my wish that any lump sum death benefit available under the appropriate LGPS Regulations to be paid as follows – you can name as many beneficiaries as you want, if there are not enough spaces on this form please ask for another one.

Your Details:

Surname:				Forename(s)		
Title:		National Insurance Number:		Payroll/Employee Number:		
Home Address:						

Your Beneficiaries Details:

Full Name:	Address:	Date of Birth:	Relationship to you (if any):	Percentage Share:
				%
				%
				%
				%

(Note: Where there is more than one potential nominated beneficiary, please indicate how the Death Grant should be split – the complete percentage for all beneficiaries should add up to 100%)

Your Signature: _____ Date _____

Witnessed By:

Surname:				Forename(s)		
Title:		Witness's Address:				

Witness's Signature: _____ Date _____

This form must be witnessed at the time of completion by someone other than a named beneficiary.

Please check the details on this form are correct and clearly written and that:

- the percentage shares add up to 100%
- you have signed and dated the form
- it has been signed and dated by a witness who is **not** a nominated beneficiary

This expression of wishes form will be cancelled by the completion of another valid form (available from the Pensions Team).

For further information please visit www.lewishampensions.org

Please return your completed form to:

London Borough of Lewisham
Pensions Team
4th Floor, Laurence House
1 Catford Road
London
SE6 4RU

020 8314 7277

pensionsteam@lewisham.gov.uk