



Application for Preserved Retirement Benefit

1995 Section

2008 Section

2008 Optant

CARE

To be completed by the applicant. Please read "A Guide for Pensioners and their Dependants" before completing this form.

- You **must** complete Parts 1-9 of this form and **return along with a copy of your birth certificate**.
- If you have any difficulty completing this form please contact HSC Pension Service.
- Please complete in **black ink** using **CAPITAL** letters.

Part 1 – Personal details

1 Surname

2 Forename(s) *(in full)*

3 Maiden name *(if applicable)*

4 Date of birth *(You must attach a copy of your birth certificate)*

5 Title *(tick correct box)*

Dr Mr Mrs Miss Ms

6 National Insurance number

7 Your present address

 ----- Post code -----

8 Your daytime telephone number

9 Home e-mail address

Part 2.1 – Status

10 What is your status?

(tick the appropriate box)

Married Single Widowed Divorced Civil-partner Dissolved CP Survivor CP
Nominated Partner*

11 If you are / were married, please give –

The date of your marriage

 / /

Enclose your marriage certificate and spouse's birth certificate

12 If you are in a registered civil partnership (CP), please give the dates of your registered partnership

 / /

Enclose your CP certificate and CP's birth certificate

13 If you are a widow / widower, surviving partner, please give the date of your wife's / husband's / partner's death

 / /

Enclose your spouse or CP's death certificate

14 If appropriate, please give the date when your divorce was granted / civil partnership dissolved.

 / /

Enclose your Decree Absolute or CP dissolution order

15 Your spouse or civil partner's full name

16 Your spouse or civil partner's date of birth

 / /

17 Your spouse or civil partner's National Insurance number

*If you have scheme membership on or after 1 April 2008 you can apply for your nominated partner to receive a survivor pension after your death by completing the form PN1, which is available from the website or by contacting HSCPension Service.

Part 2.2 - Dependent Children

If you die and leave dependent children, an allowance may be payable from the Scheme.

Have you any dependent children? Yes Give details below No

Your employer will need to see their birth certificates

Surname and other names	Gender	Date of Birth								
				/			/			
				/			/			
				/			/			
				/			/			
				/			/			

Part 5 – HM Revenue and Customs (HMRC) Information

To comply with HMRC legislation please read the 'Tax Section' of '**A guide to pensioners and their dependants**' and then answer the following questions:

- 19** Have you any retirement arrangements outside the HSC Pension Scheme, whether in payment or not. This includes money purchase AVCs, but excludes the State retirement pension? Yes please continue
No go to question 24
- 20** Will your annual pension from **all** your pension arrangements, including the HSC Superannuation Scheme, be more than £60,000 per year? Yes please continue
Don't know please continue
No go to question 24
- 21(i)** Have you taken any benefits **on or after** 6 April 2006? Yes
No go to question 23
- (ii)** Total aggregated percentage of LTA used %
- (iii)** Date of first benefit crystallisation event.
- 22(i)** Have you taken any benefits **before** 6 April 2006? Yes
No
- (ii)** Gross annual rate of pension in payment at today's date or date at **21(iii)**

If you are unable to provide us with the answers to questions 22 and 23, we will only be able to process your application if we treat your HSC Pension Scheme benefits as entirely in excess of the LTA. **This will mean the scheme paying 55% of your lump sum and 25% of your pension directly to HMRC.**

If you would like us to do this, please tick this box.

Alternatively please wait until you know what percentage of the LTA has been used before returning this form. You may need to contact the Scheme Administrator of your other pension arrangements for this.

- 23** Have you any valid certificate from HMRC that either enhance your LTA or provide you with enhanced or fixed protection? Yes *Attach a copy of certificate*
No

Certificate Number	Enhancement type	Enhancement factor	Protected lump sum value (£)

Valid enhanced protection certificate number

Part 6 - Continuing employment or re-employment in the Health Service

(IMPORTANT:- See Declaration at Part 7 of this form & the section on re-employment in the **'Guide for Pensioners and their Dependants'**). This includes employments in the NHS England & Wales, Scotland or the Isle of Man.

24 Where did you last work in the HSC?

25 What was your job?

26 What date did you leave? / /

27 Are you working in the HSC/NHS now? No Yes where are you employed?

28 What date will you be leaving? / /

29 Do you intend to work in the HSC/NHS after you get your pension? No
Don't know
Yes Please read 'A guide for pensioners and their dependants'

If 'Yes' please provide name and address of employer that will be responsible for the payment of fees.

Place of employment:

PART 7 – LUMP SUM CHOICE only applies if your last day of membership is on or after 1 April 2008, otherwise omit this item and go to Part 8

Do you want an additional lump sum by giving up part of your pension? Yes Continue below No go to Part 8

If YES do you want the maximum additional lump sum permitted? Yes go to Part 8 No continue below

Additional lump sum of (whole pounds only)
(This is in addition to your normal lump sum)

Part 8 – Payment details (if you live outside the UK please contact HSC Pension Service)

Please pay my pension and lump sum to my - Bank
(please tick)

Building Society

Name of Account Holder _____

Name of Bank / Building Society

Branch

Branch address

----- ----- ----- ----- ----- Post code -----

Bank Sorting Code
(This is the 6 figure number on your personal cheques)

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
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Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Building Society Roll No.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Part 9 – Declaration – to be signed and dated by all applicants

- I **declare** that I am retiring from HSC employment.
- I confirm that I have read the scheme guidance '*A guide for pensioners and their dependants*'.
- I understand that it is my responsibility to inform HSC Pension Service of any re-employment in the HSC/NHS in order to minimise the possibility of a potential overpayment of benefits.
- I understand that, if I have retired on normal age grounds, my pension **MAY BE SUSPENDED** if I return to HSC/NHS employment within **one month**. Work in the HSC/NHS totaling 16 hours or less a week is ignored for this purpose.
- If I have chosen to retire early, (except on VER 'actuarially reduced") and return to HSC/NHS employment before age 60 then my pension can be suspended or abated depending on my earnings.
- I understand that I will have to pay back any overpayment of pension that occurs due to any re-employment and failure to do so may result in referral to the Counter Fraud and Probity Unit within the Business Services Organisation.
- I confirm that I have read the Guidance relating to Recycling of Pension Commencement Lump Sums (PCLS) and understand my obligation in notifying HSC Pension Service if I recycle my HSC PCLS.
- If I have Fixed Protection I declare I have checked for Benefit Accrual (Note 2 on the Certificate for Fixed Protection refers) and have not had Benefit Accrual up to and including the date of my retirement.
- I **declare** that the information I have given is correct and complete to the best of my knowledge and belief. I hereby agree to notify HSC Pension Service immediately of any changes to the information provided at time of application.
- I **apply** for my Scheme retirement benefits.

Signature _____

Date ____/____/____

This form should be forwarded to:

**HSC Pension Service
Waterside House
75 Duke Street
Londonderry
BT47 6FP**

Telephone: 02871 319 111

SMS TEXT MESSAGING SERVICE

HSC Pension Service has now implemented a NEW Text Messaging Service. Pensioners should join this service to receive important updates on information relating to their pension. **To join this service text HSCPENSIONS to 67300.**

Note: This initial text message will incur a one off charge based on your network operator's standard text message rate. However, all subsequent text messages sent from HSC Pension Service will be free of charge. To end your HSC Pension Service text alerts membership text STOP to 67300.