



**Northern Ireland
Fire & Rescue Service**



**Business Services
Organisation**

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

Tel: 02871 319111
Web: www.hscpensions.hscni.net
Email: NIFRSQueries@hscni.net

LETTER OF AUTHORITY

I _____ give my consent for the BSO HSC Pension Service on behalf of Northern Ireland Fire and Rescue Service to approach my previous provider _____ for the purpose of transferring my pension benefits.

POLICY NUMBER:- _____

NAME:- _____

SERVICE NO:- _____

DATE OF BIRTH:- _____

NATIONAL INSURANCE NO:- _____

ADDRESS:-

DATE:- _____

SIGNATURE:- _____

PENSION BENEFIT TRANSFER REQUEST FORM**PLEASE COMPLETE IN BLOCK CAPITALS**

NAME IN FULL:	<input type="text"/>	
SERVICE NO:	<input type="text"/>	DATE OF JOINING: <input type="text"/>

CURRENT FIRE SERVICE SCHEME: (FPS, NFPS, CARE, ETC)	<input type="text"/>
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PLEASE INDICATE WHETHER YOUR PREVIOUS SCHEME WAS:

1. AN EMPLOYER'S SCHEME:

or

2. A PRIVATE SCHEME:

PREVIOUS PENSION DETAILS	
EMPLOYER NAME AND ADDRESS (if an employer's scheme):	
<input type="text"/>	
<input type="text"/>	
PENSION SCHEME PROVIDER AND ADDRESS:	
<input type="text"/>	
<input type="text"/>	
PENSION REFERENCE NUMBER:	<input type="text"/>

I authorise the Northern Ireland Fire & Rescue Service to contact my previous pension provider in order to investigate possible transfer of my pension rights in relation to the policy/scheme detailed above.

SIGNED: _____ DATE: _____