



Northern Ireland Firefighter Pension Scheme 2007 Contribution adjustment – compensation payment

Personal details:	
Full name	
National Insurance Number	
Payroll Number	
Date of birth	
Email address	
Phone number	
Address	
Compensation payment for return of pension contributions	
I do wish to have my contributions adjustment compensation payment made to me as soon as possible.	
I do not wish to have my contribution adjustment compensation payment made to me now and I would like this to be held on account for the time being.	
Declaration:	
<i>Please read each of the statements below and if you agree, sign, date and return the form</i>	
☒ I understand that if I choose to have this payment made to me now, and that if I then elect for reformed scheme benefits at retirement, I will owe contributions for the whole remedy period and interest will be due up to the date that I make the payment.	
☒ I understand that if I choose to hold this payment on account, this is an indicative choice only. I can change my mind each year upon receipt of my ABS-RSS or at retirement.	
Full name (please print)	
Signature	
Date	
Return the entire form to:	
NIFRS Pension Team, HSC Pensions, Orchard House, Derry, BT48 6AT or via email at McCloud@NIFRS.org	