

Local Government Pension Scheme (LGPS) Election to opt back into the LGPS.



This form is for completion by those members of the LGPS who have previously opted out of the Pension Scheme and wish to opt back in.

On opting back into the LGPS a pension record (for each employment) will be set up and an official notification of your membership of the LGPS will be sent to you. You should check your pay slip to make sure that pension contributions are being deducted.

The completed opt in form should be returned to your employer's Payroll Section or Human Resource department. This is so your employer knows to start taking pension contributions. Once this has been done, this form will be passed on by your employer to Shropshire County Pension Fund. The form will be retained as a record of your election to opt back into the LGPS.

It is important that you fully complete this form. If it is incomplete, the form will not be accepted as a valid request and will be returned to you for clarification.

The Shropshire County Pension Fund is a Data Controller under Data Protection legislation. This means we store, hold and manage your personal data in line with statutory requirements to enable us to provide you with pension administration services. To enable us to carry out our statutory duty, we are required to share your information with certain bodies, but will only do so in limited circumstances. For more information about how we hold your data, who we share it with and what rights you have to request information from the Fund, please visit www.shropshirecountypensionfund.co.uk.

SECTION 1 - PERSONAL DETAILS

Surname		Mr/Mrs/Miss/Ms/Other	
Forename(s)		Date of Birth	
National Insurance No.		Employer	
Home Address			
Postcode		Daytime Tel. No.	
Email Address			

I confirm that by providing my email address, I freely consent to Shropshire County Pension Fund emailing me in relation to my pension. (Please note that you do not have to provide your email address, if you do not this means the Fund will not be able to contact you with information about your pension and you will not be able to register to view your pension account online including your annual benefit statement and a paper copy must be requested. For more information on what the Fund does with your personal data, please refer to our Privacy Notice on our [website](#).)

Please provide details below of the job(s) in which you wish to opt back into the LGPS.

If you have more than one job in which you have opted out, you can opt back into the Scheme in one, some or all of the jobs. You should only provide details below of the job(s) in which you wish opt back into the LGPS. If you wish to opt back in to more than 3 jobs you will need to complete and return an additional form. If you hold jobs in the LGPS with different employers you will need to complete and return a separate form to each employer.

	Job title	Post Number (if known)	Payroll Number (if known)
Job 1			
Job 2			
Job 3			

Turn over for section 2.

Please ensure this form is completed fully and the declaration on page 4 is signed before returning to your employer.

For Official HR/Payroll Use Only

Action		Date
Form received by Employer		/ /
Notification sent to payroll / actioned		/ /
Opt in request notified to the Pension Fund?	Yes / No	/ /
Date of re-commencement in LGPS	/ /	Contribution rate %
Authorised Signature		/ /

SECTION 2– Previous LGPS Scheme Membership
If you have more than 3 previous LGPS pensions please continue on a separate sheet

As you are re-joining the LGPS after opting out, you may have previously built up LGPS pension rights in this post or through another employment. It important you tell us about this membership, as this can affect your benefits, for instance, in some circumstances previous LGPS benefits will automatically be joined with your new active pension account.

If you hold deferred benefits in the LGPS as a result of opting out of the post(s) which you now wish to opt back into, after 11 April 2015, you do not have the right to aggregate this previous membership with the new period of membership which will commence as a result of this opt in request. In addition to this, special rules also apply if you were a member of the LGPS on or before 31 March 2014.

You should list any previous LGPS membership below.

LGPS Pension 1 – Details of previous LGPS membership

Name of employer				
Job Title				
Name of LGPS Pension Fund				
Date commenced in LGPS			Date ceased in LGPS/Opted Out	
When you left did you (circle)	Take a refund	Draw a pension	Transfer benefits	Defer benefits

LGPS Pension 2 – Details of previous LGPS membership

Name of employer				
Job Title				
Name of LGPS Pension Fund				
Date commenced in LGPS			Date ceased in LGPS/Opted Out	
When you left did you (circle)	Take a refund	Draw a pension	Transfer benefits	Defer benefits

LGPS Pension 3 – Details of previous LGPS membership

Name of employer				
Job Title				
Name of LGPS Pension Fund				
Date commenced in LGPS			Date ceased in LGPS/Opted Out	
When you left did you (circle)	Take a refund	Draw a pension	Transfer benefits	Defer benefits

Please ensure this form is completed fully and the declaration on page 4 is signed before returning to your employer

SECTION 3– Previous Pension Scheme Membership

If you have previously paid into a pension scheme we need to know about it as it can affect your pension with us. We need to know about previous pension rights from:

- a previous employer's pension scheme, or
- a self-employed pension plan, or

- a 'buy-out' policy, or
- a personal pension plan, or
- a stakeholder pension scheme, or
- an Additional Voluntary Contribution (AVC) arrangement

It may be possible to transfer previous pension rights to the LGPS, however applications for pension rights to be transferred into the LGPS must be made **no later than 12 months after entering the employment** to which you wish to transfer in your previous pension rights. If you have been in your employment longer than 12 months, you will need the agreement of both your employer and the Fund to transfer in previous benefits.

You should list any other pension membership below.

Pension 1 - details of previous Pension Scheme membership

Name of employer or personal pension provider				
Job Title <i>(if pension linked to a previous employment)</i>				
Policy Number				
Pension scheme name and address				
				Postcode
Date commenced		Date ceased		
When you left did you <i>(circle)</i>	Take a refund	Draw a pension	Transfer benefits	Defer benefits
Transfers can only be requested within 12 months of joining your employment. Would you like to investigate a transfer of these benefits? <i>(tick)</i>				Yes <input type="checkbox"/> No <input type="checkbox"/>

Pension 2 - details of previous Pension Scheme membership

Name of employer or personal pension provider				
Job Title <i>(if pension linked to a previous employment)</i>				
Policy Number				
Pension scheme name and address				
				Postcode
Date commenced		Date ceased		
When you left did you <i>(circle)</i>	Take a refund	Draw a pension	Transfer benefits	Defer benefits
Transfers can only be requested within 12 months of joining your employment. Would you like to investigate a transfer of these benefits? <i>(tick)</i>				Yes <input type="checkbox"/> No <input type="checkbox"/>

Pension 3 - details of previous Pension Scheme membership

Name of employer or personal pension provider				
Job Title <i>(if pension linked to a previous employment)</i>				
Policy Number				
Pension scheme name and address				
				Postcode
Date commenced		Date ceased		
When you left did you <i>(circle)</i>	Take a refund	Draw a pension	Transfer benefits	Defer benefits
Transfers can only be requested within 12 months of joining your employment. Would you like to investigate a transfer of these benefits? <i>(tick)</i>				Yes <input type="checkbox"/> No <input type="checkbox"/>

SECTION 4 – Death Grant Expression of Wish Form

If you die in service as an active member of the LGPS there is a lump sum death grant of 3x pay payable. To make an 'expression of wish', for whom you would like the death grant payable to in the event of your death, please complete the form below.

The Scheme Managers cannot be legally bound by an expression of wish and must retain absolute discretion but, they will make every effort to comply with your wishes where practicable to do so. It is important to remember to update your expression of wish if your circumstances change.

Where you have provided us with personal data about other individuals, such as family members, dependants or potential beneficiaries under the Fund, please ensure that those individuals are aware of the information contained within this notice.

I wish you in the exercise of your discretion to make payment of any lump sum death grant to the following individual(s) and/or organisation(s) in the proportions indicated. This form revokes any previous expression of wish made by me. *If you are nominating more than 1 beneficiary, each of the proportions should total 100%

Your nomination details (If you wish to choose more than 4 nominees, please request an additional form)

Nominee 1 Name		Address	
Relationship		Proportion	%
Nominee 2 Name		Address	
Relationship		Proportion	%*
Nominee 3 Name		Address	
Relationship		Proportion	%*
Nominee 4 Name		Address	
Relationship		Proportion	%*

SECTION 5 – Declaration (Please tick the boxes to confirm)

I confirm that I wish to opt back into the LGPS in the job(s) indicated on this form.

I further confirm that the information I have provided on this form is correct.

I have provided details of my previous LGPS and non-LGPS pensions membership and understand that I have 12 months to investigate a transfer of these benefits into the LGPS.

I understand that if I hold deferred benefits in the LGPS as a result of previously opting out of the job(s) mentioned on this form after 11 April 2015, I do not have the right to aggregate this previous membership with my new period of membership.

I have completed the expression of wish form above and agree that this form reflects my wishes.

Sign		Date	
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Once completed this form should be returned to your employer's HR or payroll department not the Pension Fund.

For help and advice on completing the form, contact the Pension Fund.

Shropshire County Pension Fund Contact Details:

Write: Pensions Services, Abbey Foregate, Shrewsbury, SY2 6ND.

Email: pension@shropshire.gov.uk