

# DEVON PENSION SERVICES

## OPTION FORM

Before completing this form, it is important that you read 'The brief employee's guide' leaflet which gives details on the Local Government Pension Scheme. If you wish to read the full members guide, this can be accessed on our website: <http://www.devon.gov.uk/pensions>

EMPLOYEE DETAILS	
NAME:	DATE OF BIRTH:
HOME ADDRESS:	
EMPLOYMENT START DATE:	N.I. NUMBER:
EMPLOYER:	
SECTION A	
OPTION TO JOIN THE LOCAL GOVERNMENT PENSION SCHEME	
<p>I have read 'The brief employee's guide' leaflet and now elect to join the Local Government Pension Scheme.</p> <p>Signed..... Date.....</p> <p><i>(Pension contributions will start to be deducted from your pay following the next pay period)</i></p>	
SECTION B	
OPTION NOT TO JOIN THE LOCAL GOVERNMENT PENSION SCHEME	
<p>I have read 'The brief employee's guide' leaflet and <b>do not</b> wish to become a member of the Local Government Pension Scheme.</p> <p>Signed..... Date.....</p>	

**Please sign and date the appropriate section above and return your form to your employer's payroll section.**

***If you have completed Section A above and have previous pension rights, please complete the form overleaf.***

In the meantime if you have any questions please find below Devon Pension Services contact information:

Member Surname	Phone number
A – GILL	01392 688216
GILLA – PARR	01392 688214
PARS – Z	01392 688212
Email: <a href="mailto:pensions@devon.gov.uk">pensions@devon.gov.uk</a>	



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## PREVIOUS PENSIONABLE SERVICE

(TO BE COMPLETED BY EMPLOYEE)

NAME AND ADDRESS OF PREVIOUS EMPLOYER OR AUTHORITY OR PERSONAL PENSION PROVIDER	APPOINTMENT HELD (IF APPLICABLE)	PERIOD OF SERVICE/ CONTRIBUTION PERIOD		NAME OF PENSION SCHEME AND/OR POLICY NUMBER	WERE CONTRIBUTIONS REFUNDED?	DO YOU RECEIVE A PENSION?
		FROM	TO			

ADDITIONAL CONTRIBUTIONS	AVC
If previous contributing to the Local Government Pension Scheme, have you made an election to pay additional contributions YES/NO If YES give details _____	Have you ever paid Additional Voluntary Contributions (AVC) YES/NO If YES give details _____

Do you receive a pension from the Local Government Pension Scheme? YES/NO If YES which Authority pays your pension \_\_\_\_\_

Have you opted-out of any of your previous pension schemes? YES/NO If YES please give details: \_\_\_\_\_

I declare that I am interested/not interested in the possibility of transferring my previous service with \_\_\_\_\_ to the Devon County Council Pension Fund and I authorise the company(ies) above to provide them with any information they require.

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_