

# Powys County Council Pension Fund

## Local Government Pension Scheme

### *Notification of Termination of Pensionable Employment*

Please complete this form to notify us of a Termination of a Pensionable Employment.

You should complete one form for each employment.

PERSONAL DETAILS			
Title:		Full Name:	
Home Address:			
		Post Code:	
Tel Number:		NI Number:	
Email:			

EMPLOYMENT DETAILS			
Employer			
Job Title:			
Pay Number:		Date Terminated Post	

REASONS FOR LEAVING			
Voluntary Resignation		Opt-Out <u>OR</u> At Age 75	Dismissal
Early Retirement		Redundancy	Efficiency
Flexible Retirement		Ill Health Retirement	Death

IF AWARDING ADDITIONAL PENSION PLEASE STATE AMOUNT TO BE AWARDED £ \_\_\_\_\_

ARE YOU FULLY AWARE OF THE CAPITAL COST IMPLICATIONS FOR EARLY RETIREMENT AND/OR AWARD OF ADDITIONAL PENSION? YES/NO

PENSION CONTRIBUTION DETAILS			
<b>Please provide last two years pension contributions and NICO earnings where applicable:</b>			
Pension Contribution Rate:	Year of Leaving:	Previous Year:	
Pension Contributions Paid:	Year of Leaving:	Previous Year:	
Earnings on which contracted out rate National Insurance Contributions have been paid:			
	Year of Leaving:	Previous Year:	

PLEASE CONFIRM IF THE MEMBER WAS PAYING ADDITIONAL CONTRIBUTIONS:

AVCs     APCs     ARCs     ADDED YEARS

PENSIONABLE PAY INFORMATION
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**LGPS 2008 INFORMATION***(Only complete the LGPS 2008 section if the member joined the LGPS prior to 1 April 2014)*FINAL PAY: £\_\_\_\_\_ (FULL TIME EQUIVALENT IF PART TIME)  
(Full 365 days prior to date of leaving)

ACTUAL ANNUAL SALARY AT DATE OF LEAVING: £\_\_\_\_\_ FTE: £\_\_\_\_\_

**LGPS 2014 INFORMATION**CUMULATIVE PENSIONABLE PAY £\_\_\_\_\_  
(From 1 April last to date of leaving)

Please give details if the member contributed to the 50/50 section and/or give details of any assumed pensionable pay (APP) i.e. if member had any periods of reduced or no pay as a result of sickness or injury or had a period of paid child-related leave. NOTE: If at any time during a period of reduced or nil contractual pay the employee's actual earnings are greater than the APP please substitute Actual Pay for APP for these days e.g. KIT days.

Date from	Date to	ACTUAL PAY	ASSUMED PAY	MAIN	50/50
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

**HOUR / WEEK HISTORY****IF PART TIME**
 LAST CONTRACTUAL HOURS PER WEEK: \_\_\_\_\_ FT EQUIVALENT: \_\_\_\_\_  
 LAST CONTRACTUAL WEEKS PER YEAR: \_\_\_\_\_ TERM-TIME: YES/NO

IF VARIABLE - TOTAL HOURS WORKED SINCE 1 APRIL LAST: \_\_\_\_\_

**PERIODS OF UNPAID LEAVE**Please list any periods of unpaid leave since 1<sup>st</sup> April 2014

Date from	Date to	Date from	Date to

<b>Completed By:</b>		<b>Position Held:</b>	
<b>Signed:</b>		<b>Date:</b>	

*Please return the completed form to:*

**Pensions Section, PO Box 71, Powys County Council,  
County Hall, Llandrindod Wells, Powys, LD1 5LG**

**or email to [pensions@powys.gov.uk](mailto:pensions@powys.gov.uk)**