

## Local Government Pension Scheme

### Notification of Retirement (with entitlement to immediate benefits)

#### Form - LGPS-9A

This form is for employers participating in the East Sussex County Council Pension Fund. It should be used to notify ESCC of a scheme member who is retiring and will be entitled to immediate benefits.

Employer	
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#### 1. Employee details

Title - please enter Mr, Mrs, Ms, Miss or other (please stipulate)	
Forename(s)	
Surname	
National insurance number	
Status – please enter single, divorced, Civil Partnership, Civil Partnership dissolved, Married, Widow(er), Surviving (civil Partner), Cohabiting partner	

#### 2. Retirement details

Post on leaving	
Date of retirement	

#### Reason for retirement - please tick the relevant box(s)

<b>A)</b> Attained Normal Pension Age (NPA) equal to State Pension Age * (see below)	<input type="checkbox"/>
<b>B)</b> Attained age 55-60 and wishes to receive immediate payment of benefits * (see below) Please also indicate if you have 'switched on' the 85 year rule?	<input type="checkbox"/>
<b>C)</b> Attained age 60-NPA and wishes to receive immediate payment of benefits *(see below)	<input type="checkbox"/>
<b>D)</b> Permanent ill-health (please enclose copy of medical certificate *(see below)	<input type="checkbox"/>
Please also indicate which tier awarded under 2013 Regulations:	
Tier 1 (no reasonable prospect of obtaining gainful employment before SPA)	<input type="checkbox"/>
Tier 2 (no reasonable prospect of obtaining gainful employment within 3 years)	<input type="checkbox"/>
Tier 3 (likely to obtain gainful employment within 3 years)	<input type="checkbox"/>

<b>E) Attained age 55 *(see below). As well as ticking this box (if applicable) please also advise if retirement is either:</b>  1) In the interests of efficiency, or 2) By reason of redundancy	
<b>F) Flexible Retirement.</b>  Please also indicate if you have 'switched on' the 85 year rule?	

Please enter below summary of employment history (including breaks in service and all changes in contractual hours of work per week/working weeks per year). Continue on separate sheet if necessary.

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\* with not less than 2 years service, or 3 months if service commenced pre 01/04/14

**3. Pensionable pay – for members with pre 01/04/2014 service**

A) Final pay - whole-time pensionable pay during last 365 days of employment <sup>1</sup>	£
B) Part-time pensionable pay during last 365 days of employment (if applicable)	£
C) Whole-time pensionable salary at date of leaving <sup>1</sup>	£
D) During year ended	
(if one of the previous two years is higher)	£

If a valid Certificate of Protection of Pension Benefits has been issued please enter details of the pay which would yield the highest pension benefits below.

Year ended	
Whole-time equivalent pay to be used	£

<sup>1</sup> If employee is term-time, whole-time pay details given above must be 52 week equivalent.

**4. Pensionable Pay (or Assumed Pensionable Pay if applicable) (CARE)**

Actual (or Assumed) Pensionable Pay from 1 April last to Date of Leaving

Date from	Date to	Pay amount Main Section £	Pay amount 50/50 Section £

**Totals**

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## 5. Employee's pension contribution

a) Paid during year of termination	Contribution Rate	%	£
b) Paid during previous year to 31 March	Contribution Rate	%	£
c) Unpaid at date of leaving (if applicable)			£

## 6. AVC's

Amount of AVC contributions paid since last April (if applicable)	£
Amount of final contribution	£
Date final contribution paid to AVC provider	

## 7. Other awards

If the employee is entitled to an injury allowance or other compensatory award please give details below:

## 8. Enclosures

Income tax form P45 (parts 2 and 3) enclosed?	Yes <input type="checkbox"/>
Please answer 'yes' or 'no'	No <input type="checkbox"/>

## 9. Authorisation

Authorising officer – signature*	
Authorising officer – print name	
Email	
Telephone number	
Date	

\*We can accept employer forms via email without the need for a handwritten signature if the email is sent:

- By a contact at the employer who is listed on the authorised signatories list, and
- From an employer email address e.g., John.smith@eastsussex.gov.uk

Please return the completed form via email to [pensions@eastsussex.gov.uk](mailto:pensions@eastsussex.gov.uk) or by post (wet signature still required) to:

Pensions, East F, County Hall, St Anne's Crescent, Lewes, East Sussex, BN7 1UE

If you require any further support, please email [pensions@eastsussex.gov.uk](mailto:pensions@eastsussex.gov.uk) or call 0300 200 1022.