

Joining the Local Government Pension Scheme (LGPS)

Please complete this form whether you intend to join the Pension Scheme or not. This form applies to a person offered employment in which they are eligible to contribute to the Local Government Pension Scheme (LGPS) or existing employees who now wish to enter the Scheme.

Part A For completion by the employee in all cases.

Surname:	
Title: Mr/Mrs/Miss/Ms/other	Forenames:
Date of birth:	National Insurance Number:
Your Address:	
Post Code:	Telephone Number:
Current marital status: Single / Married / Divorced / Widowed / Separated / Civil Partnership	
If you selected "Civil Partnership", please confirm current status of relationship: Existing Partnership / Dissolved Partnership / Surviving Civil Partner (Partner deceased)	
Name of your Employer:	

Declaration

Please tick one box and sign below.

I confirm that the details given on this form are complete and accurate and I declare:

I wish to become a member of the Local Government Pension Scheme.		
Please attach your original birth certificate and any other original certificates or documents concerning your marital status. Failure to do so will result in a delay before any payments can be made subsequent to your leaving.		
Signed:	Date:	

Once you have completed and signed Part A (and if you wish to join the LGPS Part B also) please return this form with any attachments to your employer.

All information provided in connection with scheme membership will be processed and stored in accordance with the requirements of the Data Protection Act 1998.

Part B For completion by those employees wishing to become a member of the Local Government Pension Scheme.

If you would like us to investigate a possible transfer of pension benefits please sign below and enter the details of previous employments in relation to which you were a member of a pension scheme and attach copies of any personal notifications regarding your membership of the Schemes. Details regarding Personal Pension Plans and/or Stakeholder pensions should be included. An option to transfer your pension rights into the LGPS must be made within twelve months of joining or such longer period as your employer allows.

I authorise LPP to obtain further information regarding my pension rights with a view to a possible transfer

Signed:

Date:

Contact Name and Address for Previous Employer's Pension Arrangements or your Personal Pension Provider	Dates of employment		Place of employment	Please tick against the relevant line if you have had Pension contributions refunded (R) Pension compensation paid (C) or wish us to Investigate a transfer (I)		
	From	To		R	C	I

*** If you are in receipt of a Local Government Pension, you are required to notify the authority paying it that you have taken up further employment.**

Have you opted to pay additional contributions?
(LGPS added years, in-house AVCs or FSAVCs)
If 'Yes' please attach full details

Yes/No:

Contact details

Local Pensions Partnership
Brent Pension Team
PO Box 1383
Preston
PR2 0WR

Our offices are open from 8.30 am to 5 pm, Monday to Friday

Website: www.yourpension.org.uk

Telephone: 0300 323 0260

[Online contact form](#)