

Pension Choices

FORMER MEMBERS OF THE PCSPS OR SCHEMES BY-ANALOGY TO THE PCSPS

This pack welcomes you as a new member of the PCSPS(NI).

1). As your previous employment was covered by the Principal Civil Service Pension Scheme (PCSPS) or schemes by-analogy to the PCSPS, which are similar to the Principal Civil Service Pension Scheme, (Northern Ireland) [PCSPS(NI)], agreement has been reached between the schemes to allow members to maintain their chosen pension arrangement on changing employment. This agreement is conditional on you having no break in service between the two periods of employment. If there is a break standard new entrant rules will apply.

The pack contains:

- A Pension Choices form attached to this letter
- A pre-paid envelope to return your Pension Choices form
- The booklet, 'Your pension, your choice'
- A set of leaflets from **partnership pension account** providers
- A Customer Satisfaction Survey

If any of these items are missing, please contact your Personnel department.

2). If you were a member of **classic** in your previous scheme and have 2 or more years qualifying service you may opt to preserve your pension benefits for payment under the rules of that scheme, or transfer them to the PCSPS(NI). If you opt to transfer your benefits to the PCSPS(NI) your pension status will **remain the same**. If you decide to preserve your benefits with your previous scheme, you will only be eligible to join the PCSPS(NI) premium or partnership arrangements.

3). If you were a member of **classic plus** or **premium** in your previous scheme and have 2 or more years qualifying service you may opt to preserve your pension benefits for payment under the rules of that scheme or you can transfer your service to the PCSPS(NI). If you choose not to transfer your previous service it will remain in your old scheme and you will maintain your chosen pension arrangement on changing employment. When you retire you will have two separate pensions.

4). If you are interested in transferring the pension benefits which you have accrued into the PCSPS(NI), under Club terms, you must apply in writing within 12 months of joining the PCSPS(NI). If you choose not to transfer your previous service it will remain in the PCSPS. It may also be possible to transfer other pension benefits to the PCSPS(NI).

5). If you have less than 2 years qualifying service you will not be eligible for preserved benefits but may still opt to transfer to the PCSPS(NI).

6). You may be entitled to a refund of contributions if you had less than 2 years service and you decide not to transfer your pension benefits, for more details of this you should contact your previous scheme administrator.

7). If you were previously a member of the partnership pension account you must submit a new application as the providers have issued separate policies for the individual partnership pension schemes in the Civil Service. You can also choose to opt out of any of the arrangements if you wish.

What do I need to do now?

1. On entry to the PCSPS(NI) you should carefully read and complete the relevant Death Benefit Nomination section on this form. Members who wish to remain in classic complete DB1 section, members who wish to remain in classic plus, premium or partnership complete DB2 section.

If you wish to preserve your benefits with your previous scheme and join the premium or partnership arrangements complete DB2 section.

2. Complete this Pension*Choice* application to confirm whether or not you are interested in transferring your previous service from your previous scheme to the PCSPS(NI). Please note there is a 12 month time limit, if you wish the terms of the Public Sector Transfer Club to apply.

3. Those who had been in the partnership arrangements should also complete a new application form from their chosen provider and send this to us within 3 months of their start date.

Note: The classic plus and premium arrangements provide benefits for eligible partners. If you have completed a Declaration form for a partner's pension please return this with the Pension*Choices* form.

Please Note:

This pack is only applicable to new entrants who are coming directly, without a break of service, from employment covered by PCSPS, or schemes by-analogy to the PCSPS.

Stakeholder Pensions

HM Revenue and Custom's rules mean that members of the PCSPS(NI) may contribute to a Stakeholder Pension or a Personal Pension Plan in addition to their chosen arrangement. Contact us for further details.

Opting out

If you had chosen to opt out of your previous scheme, your status will remain the same and you will not be entered into the PCSPS(NI). If you do decide that you want to opt back into the scheme, please contact us at the address overleaf for details.

What happens next?

Forward the attached Pension*Choices* form to us and you will receive a letter of acknowledgement. If you select **partnership**, then you will receive acknowledgement from your chosen pension provider.

Further information

If you have any queries about the pension arrangements please contact us.

Pension Choices Form

Please fill in **both sides** of this form in **black ink** and in **CAPITAL LETTERS**

Section 1: Details about you

Your full name:

Date of birth:

Marital status:

Your department:

National Insurance Number:

Your full office address:

Your daytime telephone number:

Your e-mail address:

▶ **Go to Section 2**

Section 2: Your previous scheme arrangement (see note 2)

1. Classic

▶ **Go to Section 3**

2. Classic Plus

▶ **Go to Section 3**

3. Premium

▶ **Go to Section 3**

4. Partnership

▶ **Go to Section 3**

5. none

▶ **Go to Section 8, See previous note on opting out**

6. Preserve benefits
in previous scheme

▶ **I would like to preserve my current pension benefits in my previous scheme and would like to join the following PCSPS(NI) arrangement:**

Premium

Partnership

Section 3: Transfer of Benefits - please tick option (see note 3)

Please note that if you were a member of **classic** in your previous scheme, you need to transfer your benefits to the PCSPS(NI) to enable your pension status to remain the same.

- Please send me an application form and information on transferring my PCSPS benefits to the PCSPS(NI)
- Please send me an application form and information on transferring benefits from a non-PCSPS scheme to the PCSPS(NI)

Section 4: Increasing pension benefits

Please send me more information about increasing my pension benefits

Return Address:

**Civil Service Pensions
Waterside House
75 Duke Street
DERRY / LONDONDERRY
BT47 6FP**

Section 5: Benefit Statements

You will receive a benefit statement from us or your pension provider if you choose a **partnership** pension account. We are planning to extend scheme benefit statements in the future to include your state pension entitlement. We will get this information from another part of the Government.

Tick this box if you do **not** want us to get this information about your state pension

Section 6: Partnership Pension Account

Please tell us who your partnership pension provider will be (please tick).

Scottish Widows Standard Life TUC

- I enclose a completed application form for my chosen provider
- I would like to make contributions at the rate of ___ % of my pensionable earnings

Section 7: Nomination for death benefit (DB1 & DB2)

I would like the person or people named below to receive any lump sum benefit payable under the PCSPS(NI) scheme rules when I die.

DB1 - classic

Person I want to name,
and relationship: (see note 1).

Their address:

D.O.B.

/ /

DB2 - classic plus, premium & partnership

People or person I want to name,
and relationship: (see note 1).

Their address:

D.O.B.

Proportion (fraction)
(see note 2)

People or person I want to name, and relationship: (see note 1).	Their address:	D.O.B.	Proportion (fraction) (see note 2)
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

Full name of witness: (not someone you have named)

Witness's home address:

Witness's signature:

Date:

NOTES: 1. You do not have to give the persons relationship to you, but it can help to deal sensitively with matters after you die. 2. If you do not give a proportion we will divide the death benefit equally between the people you have named. 3. If you are remaining in classic fill out DB1 and witness section only otherwise, complete DB2 & witness section.

Section 8: Your authorisation - you **must** sign and date this form

Signed: Date: