

PCSPS(NI)Principal Civil Service Pension
Scheme (Northern Ireland)

Pension Choices

Welcome to your Northern Ireland Civil Service (NICS) pension starter pack. This pack tells you about your options under the Principal Civil Service Pension Scheme (Northern Ireland) [PCSPS(NI)] arrangements.

Your pension is a valuable part of your pay and reward package. On top of the pay that you receive your employer will pay a contribution towards your pension. But you need to decide what is best for you and your family.

The pack contains:

- A Pension Choices form attached to this letter;
 - Information booklet - 'premium or partnership';
 - A set of leaflets from partnership pension account providers;
 - A declaration form for a partner's pension.
- If any of these items are missing, please contact your Personnel Department.

What choices do I have?

You have a choice between two pensions for your future service – **premium** or **partnership**. Both of these provide a valuable range of benefits during your time in the NICS and afterwards. The information booklet compares the benefits for both so that you can choose the one that suits you best. You will also be asked what you want to do with the benefits from your past service, either preserved or transferred out, and any benefits from other pension arrangements.

Why do I have to make a choice now?

You will automatically join premium from your first day of service but if you wish to open a partnership pension account instead you have three months in which to make your choice. If you choose partnership within this period you can have your choice backdated to your first day of service. The information booklet explains more on this. You should still complete and return the Pension Choices form if you decide to stay in premium or if you make your choice late. The form contains important information that we need to make sure you and your family receive the full range of available benefits. **You must return this form to the address given whether or not you decide to rejoin your old scheme or if you decide to opt out or are unable to rejoin.**

What will it cost me?

If you choose premium you will pay 3.5% of pensionable earnings. Your contributions actually cost you less than 3.5% of your pay because of tax relief. The information booklet explains more on this. Remember also that your employer is making a contribution to your pension. If you choose partnership you don't have to pay anything if you don't want to, but your employer will make contributions anyway to build up a 'pension pot' for you. If you choose to put money in as well, your employer will pay extra to match your contributions up to an additional 3% of your pensionable earnings.

Please see over...



What if I don't want a NICS pension?

You can opt out of the scheme if you want to - the Pension*Choices* form allows you to do this. But you and your family will be missing out on a range of valuable benefits so please read the enclosed booklet and consider carefully before making this choice. We strongly recommend that you think very carefully before making a decision to opt out. You may still have to pay National Insurance contributions and you will be missing out on your employer paying into your 'pension pot'.

Where can I get further information?

www.civilservicepensions-ni.gov.uk

If you are thinking about **partnership**, the pension providers operate helplines. The enclosed pension provider leaflets contain contact details.

What do I need to do now?

1. Read the enclosed booklet. Remember you need to return your Pension*Choices* form within three months.
2. Telephone the partnership providers for their information packs if you are thinking about partnership.
3. Think carefully about the choices open to you. Gather any further information and consult an Independent Financial Adviser if you feel this would be helpful. (You may have to pay for any advice you receive).
4. Complete the Pension*Choices* form attached to this letter, even if you wish to stay in **premium**. For guidance on completing the form see the information booklet for more information.
5. Complete the partnership application form if you are choosing this option.
6. Please return the Pension*Choices* form and the partnership application form, if applicable, to your Personnel Department at the address overleaf.

NOTE: If you have completed a Declaration Form for a partner's pension please return this with the Pension*Choices* form.

What happens next?

Your employer will commence or cease deductions as per your instructions and if you have chosen partnership, your chosen provider will send you an acknowledgement.

Further information

If you have any queries about the pension arrangements please contact us on 028 7131 9000.

Important note

This form must be returned whether you decide to rejoin or not or if you are unable to rejoin.

PensionChoices Form

premium or partnership rejoiner

Please fill in **both sides** of this form in **black ink** and in **CAPITAL LETTERS** within 3 months of taking up your post, even if you wish to remain in premium.

Section 1: Details about you

Your full name:*

Date of birth:*

Marital status:*

Your Department / Employer:*

National Insurance Number:*

Your full office address:*

Your daytime telephone number:*

Your e-mail address:

* This information is necessary in order to complete your application.

▶ **Go to Section 2**

Section 2: Your pension choice (choose **one** option only)

Option 1. I would like to remain in **premium**

▶ **Go to (a) below**

(a) Please contact me about the possibility of transferring my pension from another employment. I understand that all transfers have a 12 month time limit (if you have lost your previous pension details - see the booklet for guidance)

(b) I enclose my completed Partner Declaration form

(c) I would like information on increasing my pension benefits

▶ **Go to Section 4**

Option 2. I would like a **partnership** pension account

▶ **Go to Section 3**

Option 3. I do not want a Northern Ireland Civil Service pension

▶ **Go to Section 7**

Section 3: Your partnership pension account provider

My choice of pension provider is (tick **one** provider only):

Scottish Widows

Standard Life

TUC

I would like to make contributions at the rate of % of my pensionable earnings.

I understand that if I join partnership within 3 months of joining, my contributions to premium can be re-paid or transferred to my partnership pension account. See the information booklet for more information.

Please make sure you fill in an application form from your chosen provider and enclose it with this PensionChoices form.

▶ **Go to Section 6**

Return to your Personnel Department at:

Section 4: Benefit statements

You will receive a benefit statement from us or your pension provider if you chose 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.

▶ **Go to Section 5**

Section 5: Your PCSPS(NI) pension scheme history

Have you belonged to the PCSPS(NI) before? **YES** - Complete this section **NO** - go to section 6.

Period of service		Employer	What happened to your pension benefits? (see list below)
From	To		
<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text"/>	<input type="text"/>

A: No pension benefits. **B:** Preserved pension for payment at age 60. **C:** Pension transferred out. **D:** Pension now in payment. **E:** Took early retirement. **F:** Other (Give details).

I am interested in linking my preserved pension (tick if applicable)

▶ **Go to Section 6**

FOLD HERE

Section 6: Nomination for death benefit

I would like the person or people named below to receive any lump sum benefit payable under the Principal Civil Service Pension Scheme (Northern Ireland) [PCSPS(NI)] rules when I die.

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" value="/ /"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>	<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 person's relationship to you, but it can help us 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.

▶ **Go to Section 7**

Section 7: Your authorisation - you **must** sign and date this form

Signed: Date: