LOCAL GOVERNMENT PENSION SCHEME ROYAL BOROUGH OF KENSINGTON AND CHELSEA PENSION FUND

LG4 LEAVER FORM - Notice of retirement (pension payable immediately)

RBKC 2022.V1

| Administering Authority | Royal Borough of Kensington & Chelsea | | | | | |
|----------------------------|---------------------------------------|--|--|--|--|--|
| Name of Employer | | | | | | |
| Is this an advance or fina | al notification? (please see below) | | | | | |

Advance notification - Please complete Sections 1 to 4 of this form as soon as retirement has been agreed with the employee. Please include estimated pay information where final details are not available. This will enable us to provide an estimate of retirement benefits and issue pension claim forms to the retiring employee.

Final notification - Sections 5 & 6 should be completed, and any changes made to Sections 1 to 4 as soon as the final pay details are available. No pension payments will be made until we have received the final version of this form.

| | ers and their payroll providers are responsible r any additional costs incurred by RBKC as a r | <i>,</i> | | ill be | | | | |
|--|--|----------------------|-----------------------------|--------|--|--|--|--|
| SECTI | ON 1- MEMBER'S PERSONAL DETA | AILS | | | | | | |
| Title | Title First name(s) Surname | | | | | | | |
| National Insurance number (NINO) Date of birth | | | | | | | | |
| Post Title | Post Title Personnel number | | | | | | | |
| Address f | for future correspondence | | | | | | | |
| | p | ost code | | | | | | |
| SECTI | ON 2 – LEAVING DETAILS | | | | | | | |
| | n for leaving – please select one | Leaving date | | | | | | |
| | | | n age with a minimum of 65) | | | | | |
| | Resignation at or after Normal Pension Age (NPA - equal to State Pension age with a minimum of 65) Scheme's upper age limit (age 75) attained | | | | | | | |
| | Resignation age 55 to NPA and wishes to receive immediate payment of reduced benefits | | | | | | | |
| Resignation age 55 to 60 – 85 year rule 'switched on' (employer to meet early payment cost) | | | | | | | | |
| Resignation age 55 to NPA – early payment reductions waived (This must be on compassionate grounds where the employee joined the LGPS before 01/04/2014) (employer to meet early payment cost) | | | | | | | | |
| Redundancy – over age 55 (employer to meet early payment cost) | | | | | | | | |
| Business efficiency – over age 55 (employer to meet early payment cost) | | | | | | | | |
| Flexible retirement – any early payment reductions apply# (possible employer cost) | | | | | | | | |
| Flexible retirement – early payment reductions waived #(employer to meet early payment cost) | | | | | | | | |
| *You will need to complete the New Starter datafile to confirm details of the ongoing post | | | | | | | | |
| In order to allow full or partial flexible retirement, your discretions policy must be published. | | | | | | | | |
| | allow partial flexible retirement? (Y or N) | | | | | | | |
| | all pre 2008 benefits must be taken on flex of Post 2008 benefits taken by member if not | | | | | | | |
| Amount | of Post 2014 benefits taken by member if not | 100% | | | | | | |
| III health | n retirement, please specify Tier 1, 2 or 3 and | attach a copy of the | medical certificate | | | | | |
| Death in service | | | | | | | | |
| Other – please specify | | | | | | | | |
| | | | | | | | | |

| | | | Section 3 | - FINA | L PA | <mark>/ (2008</mark> | LGPS | definiti | on) | | | | | |
|--|----------------------------------|-----------------------------------|----------------------------------|-------------------------------------|---------------------------------------|----------------------------|------------------------|---|--|--|------------|---------------------|-----------------|--|
| Member's full name: | | | | | | National Insurance number: | | | | Personnel number: | | | | |
| The final pensionable pay shown below is in respect of the period: (The year ending on the leaving date shown in section 2, unless pay details from an earlier year are shown) | | | | | | From | DD | ММ | YY | То | DD | ММ | YY | |
| Period From To Actual a | | | (A) (B) nnual salary % WTE hours | | (C) WTE annual salary (A) / (B) | | | (D) Fraction of months & days for | | (E) Total amount of WTE pay for period shown | | | | |
| 110 | | £ | | | % | | £ | | | period shown | | (C) x (D) / 12 £ | | |
| | | £ | | % | | £ | | | | | £ | | | |
| | | £ | % | | % | £ | | | | | £ | | | |
| | | £ | % | | % | £ | | | | | £ | | | |
| | | | | | | | | | Sub total (| E) | £ | | | |
| ADDITIONAL VARIABLE PAYMENTS Type of Additional Variable Payment (Pensionable under | | | | riod for which payment(s) earned | | | Total amount paid | | Amount of payment relevant to final pay period | | | | | |
| Please show any additional variable payments Continuous continu | | | | | From | | То | | | | | | | |
| made (excluding pay for non-contractual overtime and additional hours) and the period the payments were in respect of. | | | | | | | | | £ | | £ | | | |
| | | | | | | | | | £ | | £ | | | |
| | | | | | | | | | Subtotal (I | =) | £ | | | |
| DECLARATION BY EMPLOYER COMPLETING THE | | | | | | | | | Total (E + F) £ | | | | | |
| On behalf of the en aware of the require | | | | | | | | | | date of | leaving. | I further ce | rtify that I am | |
| I understand under bonuses, contractu Pensionable pay u pay in lieu of notice | al overtime, Matunder the 2008 i | ernity Pay, Pater regulations doe | rnity Pay, Ador s not include | otion Pay a : any non- | nd any contrac | other taxa | ible bene time or a | fit specified Idditional | d in the employe hours worked, | ee's con | tract as b | eing pensi | onable. | |
| Print name Post title | | | | | |) | | | Date: | | | | | |
| | | | | | | | | | | <u> </u> | | | | |

| Member's | Name | | | | | | | | | |
|---|---|---------------------------|---|--------------------------------|---|--|---|--|--|--|
| NI No. | | | | | Personnel no | umber | | | | |
| | Section | 1 4 – PENSIC | DNABLE P | AY F | OR LGF | PS 20° | 14 SCHEME | | | |
| Please pi | rovide det of leaving, | ails of which sect | ion(s) of the scl or the previous ye | heme tear to 3 | the member | contribu | ited to in the final year from 1 April to ously notified), together with the total | | | |
| | Start and end date for each section of the scheme (A) | | Please tick below to indicate wh member contributed to the main or the 50/50 section of the schen the periods in (A) | | | ection | Total pensionable pay for each individual period in (A) – (including Assumed | | | |
| Fre | om | То | Main sectio | n | 50/50 sec | tion | Pensionable Pay) | | | |
| | | | | | | | £ | | | |
| | | | | | | | £ | | | |
| | | | | | | | £ | | | |
| | | | | | | | £ | | | |
| What is the *The APF 3 monthly more infor | he Assum figure sho (or 12 wee mation. Re | | e calculated in the ds of pay prior to the uide on our websi | e norma he date te for m | al way but usin of termination nore information | ng the avenue of the desired t | erage of the pensionable pay for the Please Employer Guidance Notes for APP: | | | |
| SECT | ION 5 - | PENSION C | ONTRIBUTI | ONS | ONLY com | olete whe | en submitting <u>Final version</u> of this form) | | | |
| Contribu | ution sun | | ril to the date | of lea | ving AND f | | previous year ending 31 March (if | | | |
| | | | Final year | | ious year | | Final contribution rate | | | |
| Member | contributi | ons MAIN section | £ | £ | | | | | | |
| Member | contributi | ons 50/50 section | £ | £ | | | | | | |
| Member | 's APC / S | CAPC conts *# | £ | £ | | * Additional Pension Contracts | | | | |
| Employe | er SCAPC | contributions # | £ | £ | | # Sh | ared Cost Additional Pension Contracts | | | |
| ARC cor | ntributions | ** | £ | £ | | | dded Regular Contributions ntracts commenced before 01/04/2014) | | | |
| Added y | ears contr | ributions | £ | | | (66) | Added Years % % | | | |
| Additio | nal inforn | nation required fo | or members co | ntribu | ting to a Lo | cal Gove | ernment AVC arrangement | | | |
| AVC pro | ovider (eg | Prudential) | | | contribution | ns final y | year 1 April to £ | | | |
| Amount | of final A | VC contribution | £ | | | oution p | aid to AVC provider | | | |
| SECTI | ON 6 – | DECLARATION | ON BY EMP | LOY | 'ER | | ONLY complete when submitting | | | |
| | | nployer, I declare t | | | | ns 1 to 5 | Final version of this form) above is correct. | | | |
| Print N | | | | | | ate | | | | |
| Post tit | le | | | | <u> </u> | nail addre | 255 | | | |
| | number | | | | | | | | | |
| | - | | | | | | | | | |

| Phone: 020 7361 2323 (9am – 5pm weekdays) |
|---|
| |
| Additional Information |
| Please include any relevant additional information here relating to this member's retirement / death in service |
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Return this form (with new starter data file if flexible retirement or copy of ill health certificate):

Address: RBKC Pensions Team, 3rd Floor Green Zone, The Town Hall, Hornton Street,

Email:

London, W8 7NX

pensions@rbkc.gov.uk (please include the word "Encrypted" in the subject heading)