

## Local Government Pension Scheme

# Notification of Retirement (with entitlement to immediate benefits)

Form - LGPS-9A		
	the East Sussex County Council Pension Fund. me member who is retiring and will be entitled to immediate n for ill health cases.	
Employer		
I. Employee details		
Title - please enter Mr, Mrs, Ms, Miss or other (please stipulate)		
Forename(s)		
Surname		
National insurance number		
Address where correspondence should be sent		
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	Tick relevant box
A) Attained Normal Pension Age (NPA) equal to State Pension Age * (see below)	
<ul> <li>Attained age 55-60 and wishes to receive immediate payment of benefits</li> <li>* (see below)</li> <li>Please also indicate if you have 'switched on' the 85 year rule?</li> </ul>	
C) Attained age 60-NPA and wishes to receive immediate payment of benefits *(see below)	

Reason for retirement			Tick rel	levant box
E) Attained age 55 *(see below please also advise if retirement		nis box (if applicable)		
<ul><li>I) In the interests of eff</li><li>2) By reason of redund</li></ul>	-			
F) Flexible Retirement.				
Please enter below summary contractual hours of work pe				
* with not less than 2 years s	ervice, or 3 months if s	ervice commenced pre 01	/04/14	
3. Pensionable pay – for n	nembers with pre 01	/04/2014 service		
A) Final pay - whole-time per	sionable pay during last	: 365 days of employment	I	£
B) Part-time pensionable pay during last 365 days of employment (if applicable)			£	
C) Whole-time pensionable salary at date of leaving 1			£	
D) During year ended				
(if one of the previous two years is higher)			£	
If a valid Certificate of Protection would yield the highest pensi		s has been issued please e	nter detail	s of the pay which
Year ended				
Whole-time equivalent pay to be used		£		
If employee is term-time,	. ,		•	alent.
4. Pensionable Pay (or As Actual (or Assumed) Pensional			E)	
Date from	Date to	Pay amount Main Section £		Pay amount /50 Section £
		Т	otals	_

<b>5</b> .	<b>Empl</b>	loyee and En	nployer	Contribut	tions

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)			£	
d) Employer contributions paid during year of termination		£		
e) Employer contributions paid during previous year to 31 March		£		

### 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 🗆
Please answer 'yes' or 'no'	No 🗆

#### 9. Authorisation

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

Please return the completed form to:

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

If you require any further support, please email pensions@eastsussex.gov.uk or call 0300 200 1022.