

## Local Government Pension Scheme Estimate request for early retirement

## Form - LGPSRETI - III Health - OA

Use this form if you are an employer and wish to request an estimate of the benefits that would become payable to the employee to whom the following detail relates.

Name of employer:	
. Employee details	
Employee name	
Date of Birth	
National Insurance number	
Please enter below summary of employment history (including breaks in serv contractual hours or work per week/working weeks per year). Continue on necessary.	•
2. Estimate details	
Post being terminated:	
Proposed date of leaving:	
III-health- Tier One) III-health- Tier Two	
III-health- Tier Three	
Ill-health- Tier Three Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no	
Ill-health- Tier Three Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence)	£
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Ill-health- Tier Three Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence) Estimated pensionable pay (part time, if applicable) from I April to date of	£
Ill-health- Tier Three  Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence)  Estimated pensionable pay (part time, if applicable) from I April to date of leaving  Actual pensionable pay (part time, if applicable) for the previous complete	£
Ill-health- Tier Three Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence) Estimated pensionable pay (part time, if applicable) from I April to date of leaving Actual pensionable pay (part time, if applicable) for the previous complete year ending 31 March	£ £ Yes □
Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence)  Estimated pensionable pay (part time, if applicable) from I April to date of leaving  Actual pensionable pay (part time, if applicable) for the previous complete year ending 31 March  Has pay reduced as a result of sickness/absence? – Yes or no	£ £  £  No □
Ill-health- Tier Three  Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence)  Estimated pensionable pay (part time, if applicable) from I April to date of leaving  Actual pensionable pay (part time, if applicable) for the previous complete year ending 3 I March  Has pay reduced as a result of sickness/absence? — Yes or no  If yes, from what date?	£ £  £  No □
Estimated pensionable pay (WTE) in last 365 days prior to date of leaving (this figure is what their WTE earnings would have been if there were no reductions for sickness absence)  Estimated pensionable pay (part time, if applicable) from I April to date of leaving  Actual pensionable pay (part time, if applicable) for the previous complete year ending 31 March  Has pay reduced as a result of sickness/absence? — Yes or no  If yes, from what date?  Actual pensionable earnings for three complete months prior to page 1.	£ £ £ No □

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

- By a contact at the employer who is listed on the authorised signatories list, and
- From an employer email address e.g., John.smith@eastsussex.gov.uk

## Comments

Please return the completed form via email to pensions@eastsussex.gov.uk or by post (wet signature still required) to:

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

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

<sup>\*</sup>We can accept employer forms via email without the need for a handwritten signature if the email is sent: