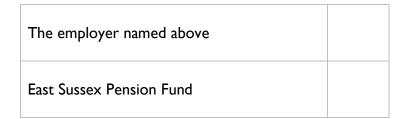# Internal Dispute Resolution Procedure
Application form – Stage 2

Please use this form to apply to the adjudicator at stage two of the internal dispute resolution procedure if you want them to investigate a complaint concerning your pension.

Your employer/former employer	

My disagreement is with a decision made by - (tick one box only)

The employer named above	
East Sussex Pension Fund	

Member's details (to be completed in all cases)

Full Name	
Address	
Date of Birth	
National insurance number	

Dependant's details

If you are the member's dependant and the complaint is about a benefit for you, please provide your details below.

Full Name	
Address	
Date of Birth	
Relationship to member	

Representative's details

If you are the member's or dependant's representative, please provide your details below.

Full Name	
Address	
Who should the address response letter should be sent to?	

Your complaint

Please give full details of your complaint below and explain exactly why you are unhappy, giving any dates or periods of scheme membership that you think are relevant.

Your signature

I would like my complaint to be considered and a decision to be made about it.

I am the (* tick relevant box below)

Scheme member/former member/prospective member	
Dependant of a former member	
Member's representative/dependant's representative	

I am dis-satisfied with the decision of the adjudicator under stage one of the internal dispute resolution procedure and request that East Sussex County Council as the administering authority review the decision.

Signed	
Date	

Please remember to enclose:

- A copy of any notification of the decision you are complaining which has been issued by the employer East Sussex County Council or the adjudicator under stage one of the dispute procedure.
- Any other letter or notification that you think might be helpful.

Where to send the completed form

Mr Philip Baker. Assistant Chief Executive, East Sussex County Council, County Hall, St Anne's Crescent, Lewes, East Sussex. BN7 1UE