

CONTROLLED ONCE COMPLETED



REDUNDANCY, FLEXIBLE RETIREMENT & SERIOUS ILL HEALTH ESTIMATE REQUEST

For estimates on voluntary retirement grounds, the employee should use <u>My Pension Online</u> or the <u>Voluntary retirement estimate request</u> form. Both can be accessed from: <u>www.derbyshirepensionfund.org.uk</u>

Employer name						Employer	ref			
Section 1 – Employee details										
Surname						Title				
Forename(s)						Phone				
Address										
Date of birth	dd/mm/yyyy National Insurance num			e numb	er					
Employee number	Post ref (if applicable)			able)						
Section 2 – Retirement details										
Prospective retireme	pective retirement date dd/mm/yyyy			n/yyyy						
Reason for leaving										
Redundancy or efficiency exercise age 55+ / Flexible retirement age 55+ / Serious ill health (for those with limited life expectancy)										
Return estimate to (name & address)										
Children's Services HR consultant (County Council school cases only)										
Section 3 - Pensionable pay data										
Contracted hours		Full time equivalent hours				Payment	days/we	eks		
Please provide an estimate of the Final Pay for the period of 365 days prior to the proposed retirement date. This is the average full-time equivalent pay (reduced for payment pays if term time working etc.) Don't include pay for non-contractual overtime or pay at standard rate for additional hours worked by part-timers.										
Estimated Final Pay (2008 definition)										
Please provide an estimate of the actual yearly pay leading up to the proposed retirement date. Only include regular allowances.										
Estimated annual rate of CARE pay (2014 definition) Main or 50/50 Section										
For serious ill health cases, please also provide the annual rate of Assumed Pensionable Pay (APP). This is for the calculation of the ill health enhancement.										
Annual rate of Assumed Pensionable Pay (APP) (for serious ill health cases)										
Section 3a - Employers <u>not</u> using i-Connect										

Employers **not** using **i-Connect** also need to provide the actual pay received from **1 April** up to the end of the **last full month**. For periods of unpaid absence or Assumed Pensionable Pay (APP), please provide details in section 4.

Last full month (e.g. June)	Main Section basic pay since April (inc any APP)	Main Section additional pay since April (allowances etc.)	50/50 Section basic pay since April (inc any APP)	50/50 Section additional pay since April (allowances etc.)	Total



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Section 4 - Notes

Please include the dates of any periods of 50/50 Section membership. Also include details of any Unpaid Absences* and APP.

For Flexible Retirements: If any actuarial reduction to the employee's benefits is to be voluntarily waived, please state the amount(s) or periods that will be waived.

*Periods of unpaid absence are those for which the member has not paid Additional Pension Contributions (APC) to buy back lost pension.						

Section 5 - Declaration

I certify that I am an authorised signatory as notified to Derbyshire Pension Fund and that the information supplied is correct.

Signature*	Date	dd/mm/yyyy
Name	Phone	
Job title	Email	

Employer: Once **fully completed** please send to **dpf.employers @derbyshire.gov.uk** or Derbyshire Pension Fund, County Hall, Matlock DE4 3AH.

If sending by email, you are responsible for the security of the personal data supplied on this form.

*Signing your form

You can sign this form in Microsoft Edge by selecting "Draw" on the toolbar. You can then save the form so it can be attached to an email.

If you are using another internet browser, download or save the form and then select "Fill & Sign" in Adobe Acrobat, or "Annotate" if using another PDF viewer. You can then add your signature.



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Guidance

This form is for estimates on the grounds of redundancy/efficiency exercise, flexible retirement, or serious ill health only. Serious ill health estimates are for those with limited life expectancy.

If an employee wishes to receive a formal estimate on voluntary retirement grounds, they can find the appropriate form on www.derbyshirepensionfund.org.uk.

This form must be completed electronically. We will return handwritten forms.

Incomplete forms will be returned. Estimates cannot be produced without pensionable pay data.

You need to provide an estimate of the Final Pay, which is usually the full-time equivalent pay for the 365 days up to the proposed date of leaving.

The estimated annual rate of CARE (or actual) pay, is used for the projection of the member's benefits up to the proposed date of leaving; you will need to select the section of the LGPS to use for the projection.

If you are not currently completing monthly data submissions using i-Connect, you will also need to complete section 3a. The data required is the pay that the employee has received from 1st April preceding the date of the quote request, up to the last full month before the date of the request.

For flexible retirements, if the employer wishes to waive any actuarial reduction to the member's benefits (at an unavoidable cost to the employer), please annotate this in the notes section and state the amount(s)/periods that will be waived.

For serious ill health estimates, we will also require the annual rate of Assumed Pensionable Pay (APP). This should be calculated using the last three full months' pay, including any APP already credited and applied in those months. The employee may not have been on APP, however, the annual rate of APP is needed to calculate the amount of enhancement added to the pension benefits.

The estimate will only be returned to the person nominated on the form, not to the employee. The nominated person should be notified to Derbyshire Pension Fund (the fund) as authorised by the employer to release LGPS benefits.

An estimate does not constitute a legal right to the benefits indicated and is provided for information only. On retirement pension benefits will be calculated using the information provided at that time.

Please ensure that the declaration has been completed by a person notified to the fund as an authorised signatory, otherwise the form will be returned.

Final Pay - LGPS 2008 definition of pensionable pay

This is the full-time equivalent pensionable pay and includes actual pensionable allowances paid but does not include non-contractual overtime payments or payments at standard rate for additional hours worked by part-timers.

CARE Pay - LGPS 2014 definition of pensionable pay

This is the actual pay received and includes all pensionable allowances, contractual overtime, and non-contractual overtime payments. It also includes payments at standard rate for additional hours worked by part-timers.

Sections of the LGPS - Main and 50/50

There are two sections of the LGPS; the Main Section where the member pays the full rate of pension contributions and receives the full rate of pension for each period of membership and the 50/50 Section, where the member pays half the contributions and receives half pension for each period of membership in the 50/50 section.