

INSTRUCTIONS ON HOW TO CREATE AND INSERT A HANDWRITTEN SIGNATURE ONTO S5 FORMS

1. Write your signature on a white piece of paper.
2. Scan the page and save it on your PC/Laptop in a common file format: .bmp, .gif, .jpg, or .png. If you do not have a scanner available, take a close-up picture of the signature with a smartphone and send the image to your email address.
3. On your PC/laptop find the scanned image or find the emailed image in your inbox (check your junk folder) and save it on your computer in a common file format: .bmp, .gif, .jpg, or .png.
4. To insert and add your signature to the S5 form click in the signature box (highlighted below), click **browse** to locate file on your PC/laptop and once located, click **open** to insert the signature image.

Screenshot of form **S5 EL/OPT** (post-1 April 2014):

Form S5 EL/OPT (post-1 April 2014)
Revised details form

This form is to be completed when notifying us of any amendments to the information provided on the original notifying letter.
 Please complete the member's details in full and your amendments, ticking the boxes, where appropriate - then sign, date and return it to the email address shown below.

Employer's name:
 Date you join the original S5 EL/OPT or not:

Member's Details
 Title: Mr Mrs Miss Other Pension reference number: 1 0
 Surname: Payroll number:
 First name(s): Date of birth:
 National insurance number:

Revised Employment Details
 Date left the Scheme:
 Reason left the Scheme: Part-time Full-time equivalent
 Hours worked at 31 March 2014:

Revised Pay Details
 Full-time equivalent pensionable pay for the last 360 days worked for calculating pay 31 March 2014: £
 Combined pensionable pay in final scheme year for the period 1 April to the date of leaving:
 Main section: £ Surplus section: £

Revised Pension Scheme Contributions (from 1 April to leaving date)
 LSPS standard contributions paid: £ Contribution rate: %
 LSPS previous year contributions paid if not already notified: £ Contribution rate: %

Additional commentary (other changes to the date of changes in the section of the Scheme, any hours changes prior to 31 March 2014 not already notified):

Certifying Officer's Declaration
 I certify the member's details are true and correct and that the new information should, where appropriate, replace all previously notified details.
 Certifying officer's signature: P115 name:
 Date: Contact phone number:

The City of Wolverhampton Council is a Data Controller under the Data Protection Act 2018. For more information on how the Council manages your personal data, please visit www.wolverhampton.gov.uk/privacy
 If you require assistance on how to complete this form, please contact the Employer Helpline on 0300 111 6516.
 Return to email address: CM1@wolverhampton.gov.uk

Screenshot of form **S5 RB/DIS** (post-1 April 2014):

Form S5 RB/DIS (post-1 April 2014)
Revised details form

This form is to be completed when notifying us of any amendments to the information provided on the return/notification letter.
 Please complete the member's details in full and your amendments, ticking the boxes, where appropriate - then sign, date and return it to the email address shown below.

Employer's name:
 Date you join the original S5 RB/DIS or not:

Member's Details
 Title: Mr Mrs Miss Other Pension reference number: 1 0
 Surname: Payroll number:
 First name(s): Date of birth:
 National insurance number:

Revised Employment Details
 Date left the Scheme:
 Reason left the Scheme: Part-time Full-time equivalent
 Hours worked at 31 March 2014:

Revised Pay Details
 Full-time equivalent pensionable pay for the last 360 days worked for calculating pay 31 March 2014: £
 Combined pensionable pay in final scheme year:
 Main section: £ Surplus section: £
 Assumed pensionable pay (for ill health or death in service only): £

Revised Pension Scheme Contributions (from 1 April to leaving date)
 LSPS standard contributions paid: £ Contribution rate: %

Revised Additional Scheme Contributions
 Type of additional Scheme contribution: AVCs RPLCs AILCs Purchase additional years
 Additional contributions paid: £

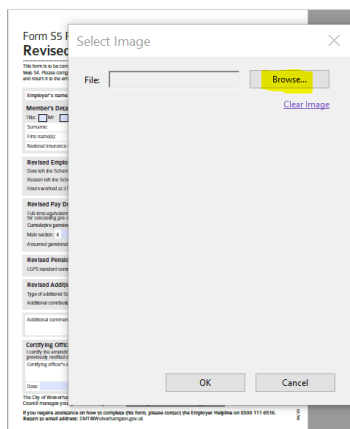
Additional comments:

Certifying Officer's Declaration
 I certify the member's details are true and correct and that the new information should, where appropriate, replace all previously notified details.
 Certifying officer's signature: P115 name:
 Date: Contact number:

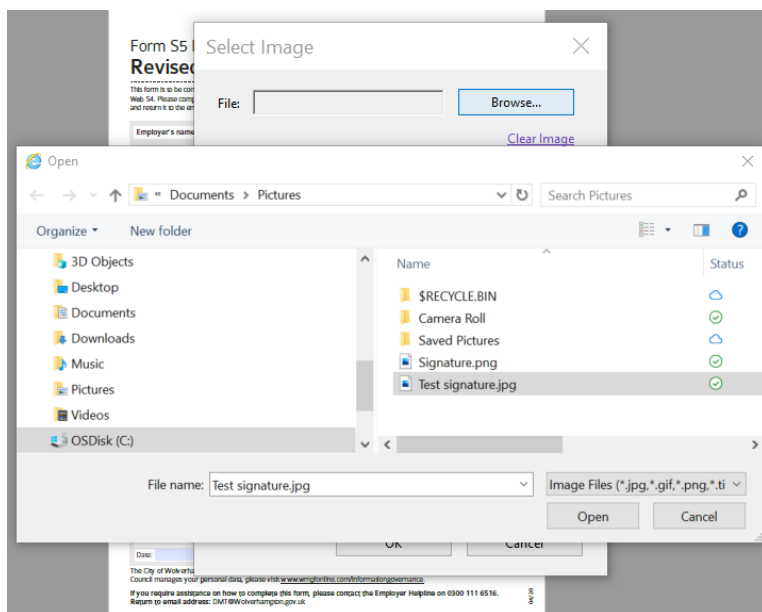
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
Clicking on the signature box, will allow you to **browse** your PC/Laptop to find the saved image of your signature.



Select your signature image from where you saved the document or image and click **open**.



Your signature will then populate the box:

Certifying Officer's Declaration	
I certify the amendment(s)/addition(s) to be true, and confirm that this new information should, where appropriate, replace all previously notified details.	
Certifying officer's signature	Print name:
	
Date:	Contact number: