Form S5 RB (post-1 April 2014)

Revised details form

West Midlands Pension Fund

Please complete this form in black ink. The use of correction fluid is not permitted.
This form is to be completed when notifying us of any amendments(s) to the information provided on the retirement/ death-in-service form (Exit Interface). Please complete the member's details in full and your amendments, where appropriate – then sign, date and return it to the email address shown below. Please tick the boxes, where appropriate. **Do not write on the reverse of this form.**

Employer's name:

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:

Hours worked at 31 March 2014: Part-time: . Full-time equivalent: .

Revised Pay Details

Full-time equivalent pensionable pay for the last 365 days worked for calculating pre-31 March 2014 benefits: £ .

Cumulative pensionable pay in final Scheme year:

Main section: £ . 50/50 section: £ .

Assumed pensionable pay (for ill health or death in service only): £ .

Revised Pension Scheme Contributions (from 1 April to leaving date)

LGPS standard contributions paid: £ . Contribution rate: %

Revised Additional Scheme Contributions

Type of additional Scheme contributions: ☐ APCs ☐ AVCs ☐ ARCs ☐ Purchase additional years

Additional contributions paid: £ .

Additional comments:

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:

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.wmpfonline.com/informationgovernance.

If you require assistance on how to complete this form, please contact the Employer Helpline on 0300 111 6516.
Return to email address: DMT@Wolverhampton.gov.uk