### SUTTON & KINGSTON SHARED PENSIONS SERVICE



# EMPLOYER REQUEST FOR AN ESTIMATE OF RETIREMENT BENEFITS FOR A LOCAL GOVERNMENT PENSION SCHEME (LGPS) EMPLOYEE

It is essential this form is completed accurately as member benefits will be based on the information provided. We are only able to provide employers one quotation per year per employee, if additional quotations are required additional administration charges will apply.

#### **Section 1: Member Information**

Full Name:			
NI Number:		Date of Birth:	
Job Title:			
Payroll Ref:			
Hours Worked:	/ 36	TT Weeks:	/ 52.143

#### **Section 2: Employer Information**

Employer Name:	
Name of individual requesting the quotation:	
Employer Email Address to send quotation:	
Proposed Date of Termination:	

#### Section 3: Proposed Reason for Termination (please tick one)

Voluntary Retirement at members state pension age (SPA)		
Voluntary Early Retirement	Full early retirement reduction applied to member benefits	
	Partial early retirement reduction applied, Rof85 protection applied to pre 2008 scheme membership	
	Early retirement with early retirement reductions waived in full	
Redundancy / Business Efficiency		
Flexible Retirement	Full early retirement reduction applied to member benefits (Rof85 automatically applied under LG regulations)	
	Early retirement with early retirement reductions waived in full	
III Health Retirement	Tier 1 (full enhancement)	
	Tier 2 (25% enhancement)	
	Tier 3 (no enhancement)	

## Section 4: Employee pay details to be used in employer estimate (From 1 April to proposed date of termination)

Career average revalued earnings (CARE) pay for post 1 April 2014 service			
Pensionable pay (including any periods of assumed pensionable pay (APP)) from 1 April to proposed date of termination:	Main Se	ection	50/50 Section
*Assumed Pensionable Pay (only required for T1 & T2 ill-health retirements):			

Final Salary pay (for pre 1 April 2014 service)		
	Full-time equivalent salary:	Effective date of salary:
Most recent full time equivalent (FTE) Salary:		
If here has been a change in FTE salary in the 12 months prior to the proposed date of termination please provide the previous salary along with effective date of change:		

#### **Section 5: Authorised Signatory**

Signed:	
Printed Name:	
Date:	
Job Title:	
Email:	

# Once complete, please send a copy of the employer estimate request form to us at <u>skemployers@sutton.gov.uk</u>.

\*Assumed pensionable pay (APP) is based on 3 months (or 12 weeks) pay period before the proposed date of leaving. The figure required is an annual figure, so the average pay in the preceding period must be uprated to 12-months. Please refer to the LGPS HR Guide which contains a full definition of how to calculate APP as well as worked examples.

#### Contact us

If you would like further information about the LGPS, you can contact us:

Email us: <a href="mailto:skemployers@sutton.gov.uk">skemployers@sutton.gov.uk</a> Call us: 020 8770 5290 (between 1 – 5PM) Write to us: Sutton Council, Civic Offices, St. Nicholas Way, Sutton SM1 1EA