

FIREFIGHTERS' PENSION SCHEMES (SCOTLAND) JOINING QUESTIONNAIRE

SECTION 1 – PERSONAL DETAILS

Surname

Former surname (if applicable)

Forenames (in full)

Title

Dr Mr Mrs Miss Ms

Other (specify)

Date of birth (e.g. 15/04/1943)

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National Insurance Number

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Contact Address

Post code

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Home telephone number (incl STD code)

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Mobile telephone number

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Email address

SECTION 2 – PREVIOUS UK PUBLIC SECTOR PENSION SERVICE

Do you have previous service in another UK Public Sector Scheme?

Yes

No

If you have answered YES to the above question please complete the table below.

If you have answered NO please go to **section 3**.

Previous Scheme	Reference	Date joined	Date left	Country
NHS Pension Scheme				
Local Government Pension Scheme				
Civil Service Pension Scheme				
Teachers' Pension Scheme				
Firefighters' Pension Scheme				
Police Pension Scheme				
Armed Forces Pension Scheme				
Judicial Pension Scheme				

Have you taken out a contract to purchase Added Years and/or Additional Pension with your previous scheme?

Yes

No

Do you wish to transfer these benefits to the Firefighters' Pension Scheme (Scotland) 2015?

Yes

No

If you have confirmed that you have previous service in the UK public sector but have elected not to transfer, it is your responsibility to provide evidence of your previous scheme membership to the SPPA.

Please note if you have preserved benefits in another UK Public Sector pension scheme and join the Firefighters' Pension Scheme (Scotland) 2015 within five years of leaving, you may be entitled to retain an earlier normal pension age. This is dependent on your age.

SECTION 3 – TRANSFERRING OTHER PENSION BENEFITS

If you wish to investigate the transfer of any previous pension rights to the Firefighters' Pension Scheme (Scotland) 2015 please provide details below.

	Previous scheme	Address	Reference no	Date left
1				
2				
3				

In most cases we can use this information to contact your previous pension provider to start off the transfer process. However, depending on the scheme, we may need to contact you again for additional information.

When we have received a reply from your previous pension provider we will write to you with transfer details. You should note that this may take a few months.

SECTION 4 - DECLARATION

I confirm that all information I have given on this form is true to the best of my knowledge and belief.

I give SPPA permission to contact my previous pension scheme(s) to confirm the information I have provided.

I understand that if I have previous membership of another UK Public Sector Pension Scheme, SPPA will be unable to update my Firefighters' Pension Scheme membership unless verification is provided.

Signature _____ Date _____

Please return completed form to: SPPA, 7 Tweedside Park, Tweedbank, Galashiels TD1 3TE