

Quotation – Election to buy out the standard early retirement reduction

EBSBOQUOT

Please read the factsheet at www.2015.sppa.gov.uk before completing this form.

SECTION 1 – PERSONAL DETAILS

Superannuation number:

Surname:

Former surname (if applicable):

Forenames (in full):

Title:

Mr Dr Ms Mrs Miss

If other, please specify:

Date of birth (e.g. 15/04/1973):

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Contact address:

Postcode:

Home telephone number (including STD code):

Mobile telephone number (including STD code):

Email address:

National Insurance number:

SECTION 2 - OPTIONS

I request a quotation to purchase a buy out agreement up to a maximum of 3 years as below:

1 year 2 years 3 years

*only if relevant months
(see factsheet)

Current employer details

Name of employer:

Pay reference number:

Contact address:

Postcode:

Continued overleaf.

SECTION 2 - Continued

If you are currently working in more than one employment contract please provide details.

Name of employer:

Contact address:

Pay reference number:

Postcode:

Signed: _____

Date:

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Completed Form

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

