

## Partnership pension account: Change of circumstances form

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### Details of member

Surname \_\_\_\_\_

Forename(s) \_\_\_\_\_

Mr / Mrs / Miss / Ms / Other \_\_\_\_\_

Date of Birth \_\_\_\_\_

National Insurance number \_\_\_\_\_

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### Details of change required - Please insert dates and tick the appropriate box

Date of change: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Last payroll deduction date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

1. Moving to new Civil Service employer

New employer name: \_\_\_\_\_

New employer code: \_\_\_\_\_

New payroll provider code: \_\_\_\_\_

2. Leaving Civil Service employment or  
Opting out of Civil Service pension  
arrangements

(We will contact the member with details of the options available)



3. Starting contribution holiday

4. Member retiring

(We will contact the member with details of the options available)

5. Change of pension provider

New provider name: \_\_\_\_\_

6. Member deceased

7. Switch to premium/nuvos pension scheme

8. No pay due to infrequent earnings (eg fee-paid)

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**Authority**

This form has been approved and checked on behalf of the Employer.

Name: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Telephone number: \_\_\_\_\_

Employer name / employer code: \_\_\_\_\_ / \_\_\_\_\_