



Internal Dispute Resolution – Stage 1 Application Form

Internal Dispute Resolution Procedures Appeal to the Administrator

Please use this application form if you want to apply to Civil Service Pensions for the first stage of the Internal Disputes Resolution procedures.

Address:

**Civil Service Pensions
Capita Pension Solutions
PO Box 713
Darlington
DL1 9JZ**

Telephone number: **0300 123 6666**

Please return this form to the above address, together with any evidence you would like to be considered as part of the investigation.

If you wish to know more about the disputes process, you can speak to your pensions administrator. You can also visit the Scheme website at

www.civilservicepensionscheme.org.uk

At the end of the process you will receive a written explanation of the decision we have made, this is called a “determination”.



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Your details

Name

Address

Postcode

Email address (see note below)

Date of birth

National Insurance (NI) number

Scheme member number (if known)

You can ask someone such as a family member, friend or Trade Union representative to take your appeal forward. If you choose to have a representative, please give their details below.

Name

Address

Postcode

Email address (see note below)

Nature of relationship to member:
(Example son, Trade Union
representative)

Correspondence

Where do you want us to send your correspondence? (please tick box)

Your address only

Your representative's address only

Both addresses

Would you like to correspond by email?

YES

NO

If YES, please confirm your
email address(es).



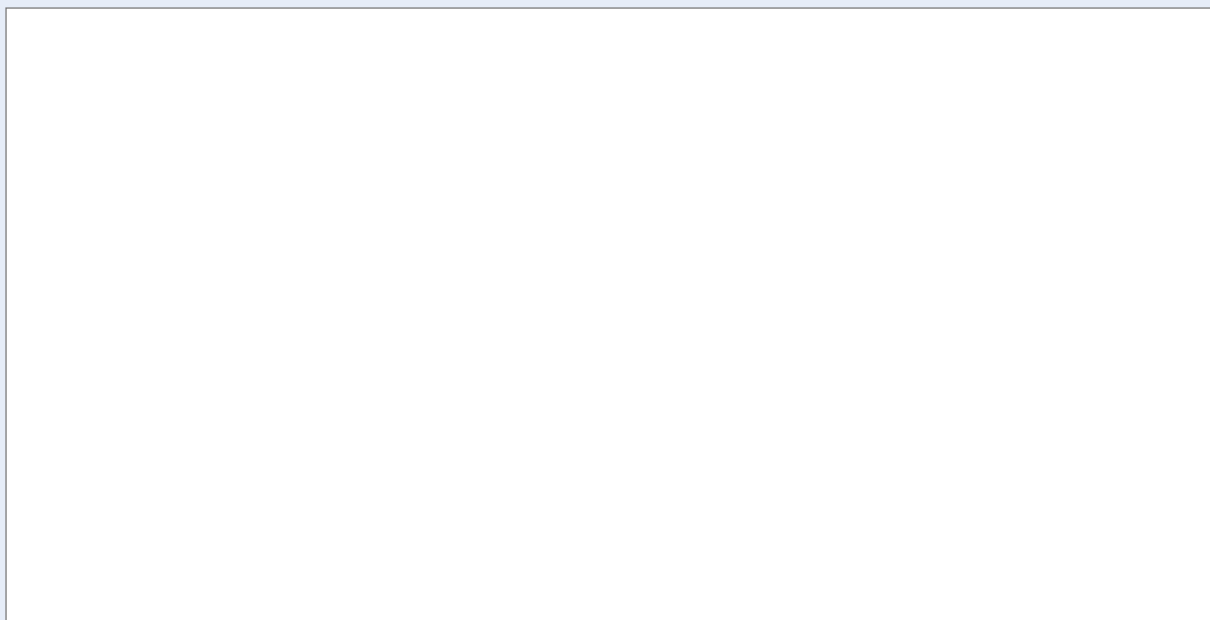
Please note: If you request communication by email, the information provided may include personal details and may be sent over an insecure network. By selecting YES, you are giving us your authority to contact you at the email address(es) you have provided.

Details of your complaint

Please give the details of your disagreement.

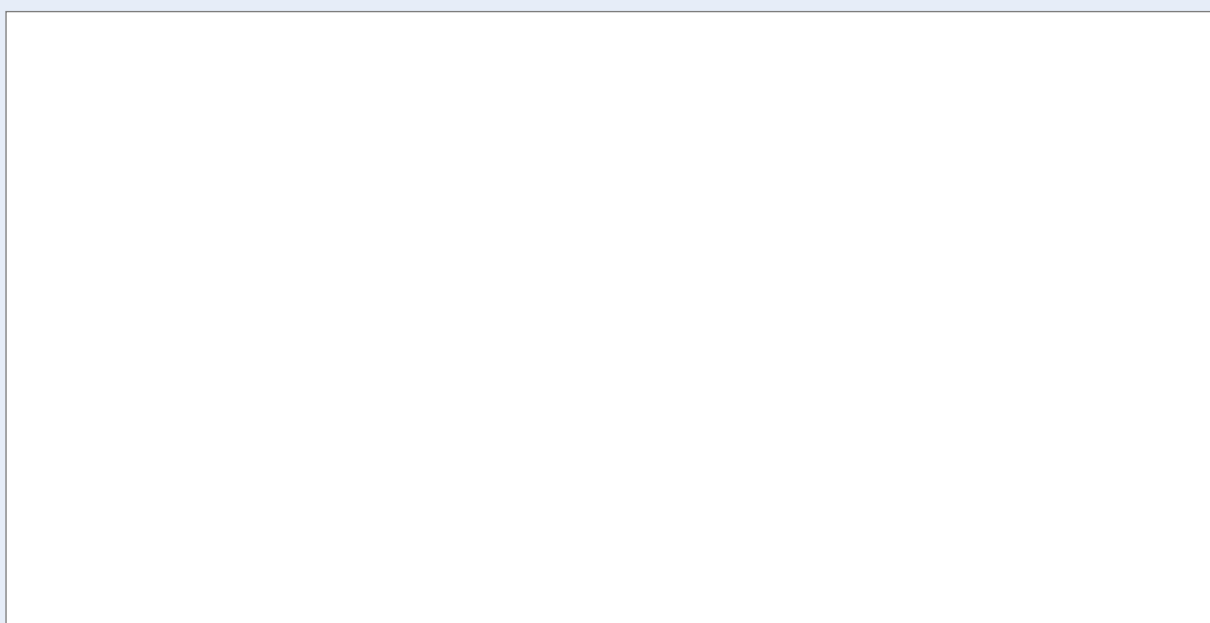
Please say what you want done to put matters right.

(If not completing this form electronically, use additional sheets as required).

A large, empty rectangular box with a thin black border, intended for the complainant to provide details of their disagreement and what they want done to put matters right.

Details of financial loss

If you think that the matter you are complaining about has caused you to suffer a financial loss, please give details below:

A large, empty rectangular box with a thin black border, intended for the complainant to provide details of any financial loss suffered as a result of the matter being complained about.

Supporting documents

It would assist the investigation if you could provide copies of any documents you have that relate to this complaint.

Document attached/enclosed

YES

NO

Number of documents attached:

Consent

Please tick one of the following:

I consent to Civil Service Pensions approaching my employer or a third party for any information relevant to my dispute:

Or

I do not consent to Civil Service Pensions approaching my employer or a third party for any information relevant to my dispute:



Please note: Approaching one of the above parties may be needed for a thorough investigation of your complaint. If you withhold your consent for Civil Service Pensions to see your papers it may affect the outcome of your appeal.

I give my consent for

to act as my representative.

Representative's consent:

I

agree to act on behalf of

Representative's signature

Date

I apply for a determination of my complaint under the first stage of the Internal Dispute Resolution procedures.

Member's signature

Date