Civil Service Pensions

Partner details form

Please provide details of your partner and your relationship to help us consider their eligibility for a partner's pension in the event of your death.

Please complete this form in **black ink** and in **BLOCK CAPITALS** and return it to:
Civil Service Pensions, PO Box 2017, Liverpool, L69 2BU.

Your personal details

Your name	
Your address and postcode	
Your employer	
National Insurance (NI) number	

Please provide your contact details

Telephone number	
Email address	

Your partner's details

Their full name (including title)	
Address and postcode	
Date of birth	/ /
National Insurance (NI) number	

Your relationship

- We confirm the following:
  - We have lived together for _____ years.
  - Our financial affairs are interdependent (or either one of us is financially dependent on the other).
  - We have a committed relationship with each other and we intend to continue this indefinitely.
  - We are mutually responsible for each other's welfare.
  - We are not related in a way that will prevent either marriage or civil partnership.
  - Neither of us is married to or in a civil partnership with anyone else.
  - Neither of us is currently nominated as the partner of anyone else.
- We will inform the scheme administrators if our relationship comes to an end.
- We understand that benefits will not be paid unless the partner provides satisfactory evidence that the declaration above is valid when the scheme member dies.

Your signature: _____   Date:_____/_____/_____

Partner signature: _____   Date:_____/_____/_____

Important information

- If you want your partner to receive any lump sum death benefits when you die, you must also complete a 'death benefit nomination form'. You will find this by searching 'member forms' on the forms page of the Civil Service Pension Scheme website: **www.civilservicepensionscheme.org.uk**
- Remember to update your partner's details if or when their circumstances change.