

Combined Pension Scheme

EARLIER QUALIFICATION FOR DEATH AND ILL-HEALTH BENEFITS

Application to purchase eligibility for pension benefits on death or ill-health retirement during the first five years of service

Surname Forenames

Employer/Location National Insurance No.....

1. I wish to purchase earlier qualification for benefits.
2. I wish to pay by * (a) single payment from my salary.
 * (b) monthly payment from my salary.
3. I believe myself to be in good health.
4. I am/am not* working part-time hours.
5. I am not on a fixed-term contract.

Signed Date

* Delete as appropriate

NB. This is not an application for the purchase of additional service.

THE COMPLETED FORM SHOULD BE SENT TO THE PENSIONS ADMINISTRATION OFFICE, THURSO

Data Protection: On receipt of this form the Pensions Administration Office will make arrangements for the appropriate amount to be deducted from your salary. The information contained in this form will be used in the administration of your pension arrangement.