

## ELECTION TO JOIN

### Election to join the Local Government Pension Scheme (LGPS)

#### Personal details

Name.....	Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Insurance number	<input type="text"/>						
Email .....							
Employer.....							
Payroll number.....				Job Title .....			

#### Election

By signing this form I am making an election to **join** the LGPS and by doing so understand that I will pay pension contributions with effect from the next available pay date.

#### Read carefully before signing

- ✓ I understand that I will be contributing into the main section of the scheme.
- ✓ I understand that I can switch to the 50/50 section at any time.
- ✓ I understand that I can opt out at any time.
- ✓ For further information please visit our website at [www.essexpensionfund.co.uk](http://www.essexpensionfund.co.uk)

**This election must be returned to your employer for your contributions to commence.**

Signed.....Dated.....

"Data Protection Act 1998: Personal information contained on this form will be held on computer files and/or relevant filing systems for the purpose of administering the Local Government Pensions Scheme. This information will only be shared with third parties for the purpose of providing the appropriate service or meeting legislative requirements"

A separate form must be used for each individual contract of employment.

**Please visit our website [www.essexpensionfund.co.uk](http://www.essexpensionfund.co.uk) for further information.  
You will also find important information at [www.lgps2014.org](http://www.lgps2014.org)**

#### To be completed by the Employer when contributions adjusted

Signed.....Date actioned.....