

APC Notification form

APC 03

To: The Avon Pension Fund

From:

EMPLOYER NAME:

Local Government Pension Scheme

Buying Lost Pension by Additional Pension Contribution

MEMBER NAME:

N.I. NUMBER:

Please find attached an application to buy back lost pension following a period of unpaid leave / unpaid child related leave.

I certify that the details contained on the application form have been checked against the unpaid leave details for the employee and are correct.

I confirm I have arranged for the contributions to be deducted from our payroll for the period specified in the application form.

Please complete as appropriate:

Date lump sum contribution deducted:

Or

Date regular contributions commenced:

SIGNATURE:

FULL NAME:

Please note this should be an authorised signatory as per your LGPS 53 held with the Avon Pension Fund

Avon Pension Fund, Local Government Pension Scheme administered by Bath & North East Somerset Council.

Data Protection: Avon Pension Fund is a Data Controller as defined in the UK GDPR. We store, hold and manage your personal data in line with statutory requirements to provide you with pension administration services. For more information about how we process your data, your individual rights and answers to frequently asked questions, please visit our website: avonpensionfund.org.uk