

NHS Pensions – request for an estimated benefit statement

We aim to provide an estimated benefit statement within 40 working days from the date we receive all the information we need.

You will need to complete Part 1 to Part 4 of the form. Your completed form can be emailed to pensionscanquery@nhsbsa.nhs.uk as the form contains personal information, sending it by email is done so at your own risk. The form can also be posted to the address below:

NHS Pensions
 PO Box 683
 Unit 5
 Newcastle upon Tyne
 NE5 9EE

Part 1 – Estimate options and applicable charges

Important note: NHS Pensions cannot normally project Practitioner benefits to future dates as we do not know upcoming dynamising and revaluation factors provided to us by HM Treasury on an annual basis.

Please select the option below that applies to your request.

	Estimate option	What you will receive										
<input type="checkbox"/>	<p>Benefits payable at normal pension age</p> <p>Estimate of benefits projected to a different date than on the latest Annual Benefit Statement.</p> <p>Please confirm the date:</p> <table border="1" data-bbox="236 1603 772 1662"> <tr> <td></td><td></td><td>/</td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td> </tr> </table> <p>(Only available for protected members of the 1995/2008 Scheme)</p>			/			/					<p>An estimate of pension benefits at the date specified.</p>
		/			/							
<input type="checkbox"/>	<p>Ill health retirement</p> <p>Early retirement on the grounds of ill health at a specified date.</p> <p>Please confirm the date:</p> <table border="1" data-bbox="236 1966 772 2024"> <tr> <td></td><td></td><td>/</td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td> </tr> </table>			/			/					<p>An estimate of ill health pension benefits at the date specified</p>
		/			/							

	Estimate option	What you will receive										
<input type="checkbox"/>	Hypothetical pension benefit calculation Such as a calculation for which no pension benefit entitlement currently exists.	An estimate of benefits based on the hypothetical circumstances specified at Part 2.										
<input type="checkbox"/>	Early retirement benefits Please indicate the intended early retirement date: <table border="1" data-bbox="236 656 770 712"> <tr> <td></td><td></td><td>/</td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td> </tr> </table>			/			/					An estimate of the reduced pension benefits payable at the date specified.
		/			/							

Part 2 – Additional information

Please add below any further information which will help ensure we provide you with the correct information. Please continue on a separate sheet if required.

Part 3 – Member’s personal details

Surname

Other names

Address

Telephone number

Email address

National Insurance no.

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Membership number
(if known)

SD			/						
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If you are acting on behalf of the Scheme member, their written authority to release information to you is required. If this has not already been provided to us, NHS Pensions, please arrange for authorisation to be sent with this form. Please provide your details below and also your relationship to the member (such as, solicitor, client, parent, child).

Your name or company name

Relationship to the member

Your address

Telephone number

Email address

Any information provided will be sent to the requestor’s address.

Part 4 - Declaration

Signature

Name (please print)

Date

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How we use your information

The NHS Business Services Authority – NHS Pensions will use the information provided for administering your NHS Pension Scheme membership and processing payment of your NHS pension benefits. We may share your information to administer and pay your NHS pension, enable us to prevent and detect fraud and mistakes, for debt collection purposes, or as required by law. For more information about who we share your information with and how long we keep your personal data and your rights, please visit our website at www.nhsbsa.nhs.uk/yourinformation