ABS Query Form 2019 - for Deferred Members

This form should be used by deferred members to query or correct information following receipt of their Deferred Annual Benefit Statement.

Please complete your identifying information so that we may match your query to your pension record and then complete the form by indicating which part of the statement you wish to query or correct. Once completed, please email the form to [PensionsABS@richmondandwandsworth.gov.uk](mailto:PensionsABS@richmondandwandsworth.gov.uk). **The subject line of your email should be “Deferred ABS 2019”**

We have issued over 22,500 individual benefit statements so we will be dealing with a lot of queries at this time. It may take a while to review all the queries, so we ask for your understanding whilst we deal with these. If we need additional information from you to enable us to deal with your query, we will let you know. We will ensure that if an amendment is needed your record will be updated and any changes will be included by the time you receive your next statement or sooner if appropriate.

**Identifying Information**

Forenames \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

National Insurance Number \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

Pension Fund\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer Name\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Leaving\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\**You can find this information on your latest statement.*

**Correcting or Querying the data in your Deferred Annual Benefit Statement**

Please mark the relevant box(es) and type the new information in the column(s) to the right.

**Personal Details**

|  |  |  |
| --- | --- | --- |
|  | **Data Item** | **Query or correct information** |
|  | Title |  |
|  | Forenames |  |
|  | Surname |  |
|  | Address Line 1 |  |
|  | Address Line 2 |  |
|  | Address Line 3 |  |
|  | Address Line 4 |  |
|  | Address Line 5 |  |
|  | Address Line 6 |  |
|  | Email address |  |
|  | National Insurance No |  |
|  | Date of Birth |  |

**Lump Sum Death Grant – Expression of wish form**

If you don’t have any beneficiaries listed, or your wish to update the beneficiaries listed you will need to complete an [Expression of Wish form](https://pensionssharedservice.org.uk/media/1092/death_grant_expression_of_wish_form.pdf). Please download, complete and email or post to us.

If the name(s) of your nominated beneficiaries is spelt incorrectly, please indicate this below:

|  |  |  |
| --- | --- | --- |
|  | **Data Item** | **Query or correct information** |
|  | Nominated Beneficiary(ies) |  |

**Partnership Status**

If your partnership status has changed recently and you need to let us know, please state below.

I am: Relevant Date/Additional Information as relevant

|  |  |  |
| --- | --- | --- |
|  | single |  |
|  | married |  |
|  | in a civil partnership |  |
|  | divorced or civil partnership dissolved |  |
|  | a widow or Widower |  |
|  | Co-habiting |  |

**If you have a specific query regarding your entitlement to your deferred benefit, please state this below.**

|  |
| --- |
|  |
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Please email the form to [PensionsABS@richmondandwandsworth.gov.uk](mailto:PensionsABS@richmondandwandsworth.gov.uk).

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