



This form should be submitted via i-Connect (NCC send to PenDocs)

Employers not yet onboarded, or for cases where the member is no longer showing on i-Connect, post paper copy to:

Norfolk Pension Fund, County Hall, Martineau Lane, NORWICH. NR1 2DH

Please complete this form promptly when a late payment is made.

Employer	<input type="text"/>		
Member's Full Name	<input type="text"/>		
NI Number	<input type="text"/>	Payroll Ref	<input type="text"/>
Last Day of Membership	<input type="text"/>	Reason for Leaving	<input type="text"/>

If pensionable pay is paid to a member after the L45 – Member Leaving Form has been completed then this form should be completed. Norfolk Pension Fund (NPF) will then revise the calculation of benefits due.

If a member leaves with less than 2 years membership then they may have received a refund of contributions from NPF. In this case there is no point in deducting further pension contributions. Please therefore check with NPF before making further deductions.

Period Covered by Pay Arrears	<input type="text"/>	To	<input type="text"/>
Date Pay Arrears Paid	<input type="text"/>	Reason for Arrears	<input type="text"/>
Date Pay Award Agreed	<input type="text"/>		

AMENDED - Full-time Equivalent (FTE) Final Pay (Pre 2014 definition)

	Date	Amount
Year Ending with last day of membership	<input type="text"/>	£ <input type="text"/>
Year Ending 1 year prior to last day of membership	<input type="text"/>	£ <input type="text"/>
Year Ending 2 years prior to last day of membership	<input type="text"/>	£ <input type="text"/>
Year Ending with date before Normal Pension Age (65) where last day of membership is after this date	<input type="text"/>	£ <input type="text"/>

AMENDED - Pensionable Pay (tax years from 2014/15 onwards)

Tax year	<input type="text"/>	Main Section	£ <input type="text"/>	50/50 Section	£ <input type="text"/>
Assumed Pensionable Pay as at Last Day of Membership					
£ <input type="text"/>					

AMENDED - NI Contracted-Out Earnings

Tax Year	<input type="text"/>	£ <input type="text"/>
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AMENDED - Employee Normal Contributions

Tax Year	<input type="text"/>	Latest % in year	<input type="text"/>	%	Amount	£ <input type="text"/>
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AMENDED - Additional Pension Contributions (APC)

Tax Year	<input type="text"/>	Employee	£ <input type="text"/>	Employer (Shared cost APC only)	£ <input type="text"/>
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AMENDED - Additional Voluntary Contributions (AVC)

Tax Year	<input type="text"/>				
Equitable Life	£ <input type="text"/>	Clerical Medical	£ <input type="text"/>	Prudential	£ <input type="text"/>

Declaration

I confirm I am authorised to complete this form on behalf of an Employer participating in the Norfolk Pension Fund.

Wet signature if paper copy otherwise input your email address in the 'Signed' box:

Signed	<input type="text"/>	Date	<input type="text"/>
Contact Name	<input type="text"/>	Telephone	<input type="text"/>

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