



Norfolk Pension Fund

LOCAL GOVERNMENT PENSION SCHEME

Change of Name or Address

Your Current Name: _____

National Insurance Number: ____ / ____ / ____ / ____ / ____

Change of Name

Your Previous Name: _____

Reason for Change: _____

(e.g. marriage, civil partnership, deed poll)

*Please send us a copy of the relevant certificate with this form.
We do accept photocopies but any originals would be returned promptly.*

Change of Address

New Address: _____

Post Code _____ Date of Change: _____

Home Telephone Number: _____

Daytime Contact Number: _____

Signed: _____ Date: _____

Paper copies of this form should be returned BY POST ONLY to:

Norfolk Pension Fund, County Hall, Martineau Lane, Norwich, NR1 2DH