

NHS Pensions – Request for a chargeable Cash Equivalent Transfer Value (CETV)

Please check the table below to see if a charge is applicable. If there is no charge, please download and complete the 'Transfer out and application pack' from the website, and do not complete this form.

A first request for a CETV or where a CETV has not been provided in the last 12 months (active or deferred member)	No charge
An additional CETV request made within 12 months of an earlier CETV being provided (active or deferred member)	£408
A replacement guaranteed CETV where the transfer election forms were not returned within three months of the guarantee date (deferred member)	£408
A CETV request when all liability has been discharged, or you are already in receipt of pension benefits	£408

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

For internal use only: please register as ESTH17A

NHS Pensions – Request for a chargeable Cash Equivalent Transfer Value (CETV)

Part 1 – Your personal details

Surname	<input type="text"/>
Other names	<input type="text"/>
Address	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>
National Insurance no.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Membership number (if known)	<input type="text"/>

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 NHS Pensions, please arrange for authorisation to be sent with this form. Please provide your details below and also your relationship to the member (for example, solicitor, client, parent, child).

Your name or company name	<input type="text"/>
Relationship to the member	<input type="text"/>
Your address	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>

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

Part 2 – Confirm the reason for your chargeable request

An additional CETV request made within 12 months of an earlier CETV being provided (active or deferred member)	<input type="checkbox"/>	£408
A replacement guaranteed CETV where the transfer election forms were not returned within 3 months of the guarantee date (deferred member)	<input type="checkbox"/>	£408
A CETV request when all liability has been discharged, or you are already in receipt of pension benefits	<input type="checkbox"/>	£408

Part 3 - Declaration

- I agree to pay the applicable charge for provision of the information specified at Part 2 of this form.

Signature

Name (please print)

Date

Part 4 - Payment

Please confirm which of the following payment methods you have chosen:

- Bank transfer payment**

The bank account details for electronic payments are as follows:

Sort code: 60-70-80

Account number: 10021205

Your reference must include the National Insurance number of the member followed by their surname. Your request cannot be processed without this information.

You need to email a copy of this form to nhsbsa.pensionsmember@nhsbsa.nhs.uk or use the following postal address:

NHS Pensions
PO Box 2269
Bolton
BL6 9JS

- Cheque**

The cheque should be made payable to 'NHS Business Services Authority', enclosed with this form and posted to:

NHS Pensions
PO Box 2269
Bolton
BL6 9JS

All charges include VAT at the standard rate of 20%