



Railways Pension Scheme
British Transport Police Force Superannuation Fund
British Railways Superannuation Fund

Estimate of Benefits (for members with no restructuring premium)

Please use form PM70 if you have a restructuring premium.

This form is used to request an estimate of benefits. When the form is received by rpm an estimate of benefits statement will be sent, this usually takes two weeks. Alternatively, you can ring rpm for an estimate of benefits statement, which will be based on the information already held on our records. Please call 0800 2 343434.

Section A – personal details

Title: Mr Mrs Miss Other _____ (please tick)
(please specify)

First names: Surname:

Pension reference number:

Date of birth: / /

Section B – details of estimate

Please tick one box

You are **remaining** in employment and claiming your benefits from / / date.
(Only for members aged 55 or over.) Please note this option is only available with your employer's consent and this request form must be signed by an authorised signatory on page 3.

You are **leaving** employment and claiming your benefits from / / date.

You are applying for your incapacity retirement benefits from / / date.

Section C – your options

1. A specific amount of lump sum

Note: this option is not available for members of the British Railways Superannuation Fund.

The estimate you receive will tell you the **minimum** and **maximum** lump sum you can receive. However, you can choose to have your estimate based on a specified amount of lump sum instead.

The amount I would like you to use in my estimate is: £

2. Extra dependant's pension (please tick if required)

Yes, I am interested in figures for the extra dependant's pension option.

If you have ticked 'yes', please fill in the following details:

My extra dependant is male My extra dependant is female

First names: Surname:

My extra dependant's date of birth: / /

Their relationship to me:

Section D – reply details

Please fill in the details of where and to whom the estimate is to be sent.

Title: Mr Mrs Miss Other _____ (please tick) (please specify)

First names: Surname:

Address:

Postcode:

Telephone: Email address:

Section E – Lifetime Allowance

If you are in receipt of pension benefits from any other scheme (excluding any benefit from the state) please tick this box:

(If you do not tick this box we will assume you are not in receipt of any other pension benefits, **and the rest of this section does not apply to you.**)

There is a Lifetime Allowance on the total amount of pension savings from all sources that can benefit from tax relief. This limit is set by the Government and increases in stages specified by HM Revenue and Customs. These details are taken into account when calculating your benefits therefore please provide details below to ensure your benefits are calculated correctly.

The Lifetime Allowance is expressed as a percentage and can be obtained from your other pension provider(s).

If you are in receipt of pension benefits from any other scheme (excluding any benefit from the State) and would like them to be taken into account in this estimate please complete the section below. **If you do not complete this section of the form the estimate will be produced assuming you are not in receipt of any other pension benefits, excluding pensions from any other railway pension schemes.**

Name of pension provider and percentage of Lifetime Allowance used _____ %

Name of pension provider and percentage of Lifetime Allowance used _____ %

Total %

Section F – pensionable earnings over the last twelve months

Please take care that the earnings details you enter are all **pensionable** amounts because the member's benefits are worked out based on the amounts in these boxes. There is a space for you to give up to six rates of pay. Please show the current rate of pay in the first column then the next most recent in the second column and so on. Delete whichever of salary/wage is not applicable. The values must all be either weekly or annual.

	current salary/wage →					← least recent salary/wage
Effective date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total pensionable earnings salary/wage (delete)	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

Section G – augmentation (if applicable)

Please tell us the amount of the additional payment

£

Please tell us how the additional payment will be used: (please tick)

pension only

pension and lump sum

Please note that this option is only available with your employer's consent and this request form must be signed by an authorised signatory.

Now please complete the disclaimer below.

Disclaimer

The company and the member accept that the scheme, Railways Pension Trustee Company Limited and rpm (and their officers, directors and employees) (the “administrators”) shall not be liable either for non-receipt of a request or for an incorrect benefits estimate or payment or non-payment of benefits arising from errors or omissions in the request and the company will indemnify the administrators in respect of any overpayment or resulting loss (or diminution of assets) suffered by any of them.

This form must be signed by either the member or an authorised signatory:

To be completed by **the member**

If the estimate requested is for retirement whilst remaining in employment or includes augmentation the form must be signed by an authorised signatory.

Signature:
(member)

Date:

Print
name:

To be completed by **the employer**

Signature:
(authorised
signatory)

Date:

Print
name:

Name of
company:

Office
address:

Email
address:

Contact
name:

Office stamp:

Telephone:



Please send this form to: rpm, PO Box 300, Darlington, DL3 6YJ.