

## Employer

## Annual Update Form

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| Name of Body: |  |
| Legal Status of Body:(Include company registration number/charity registration number if applicable) |  |
| Address: |  |
| Telephone Number: |  |
| Contact name and position: |  |
| Automatic Enrolment Scheme: |  |

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| Changes to membership of the NILGOSC pension scheme:Describe any anticipated changes to your membership of the NILGOSC pension scheme and indicative timeframe, if known, e.g. large-scale redundancy exercises, restructuring, outsourcings etc. |
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| **Changes to structure:**Please advise of any changes to your structure since the 2021 Triennial Covenant Assessment Exercise and also any planned changes to your structure in the future along with an indicative timeframe, if known, e.g. company incorporations, takeovers or mergers. |
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| Changes to Funding Sources:Please describe any changes that have taken place since the 2021 Triennial Covenant Assessment Exercise in respect of your funding sources and also any possible/known changes to your funding in the future.A copy of your latest audited accounts must be provided with this completed form. |
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| **Changes in Support or Guarantee Arrangements:**Please detail any changes that have taken place since the 2021 Triennial Covenant Assessment Exercise in respect of your support or guarantee arrangements for pension liabilities and also any possible/known changes in the future. |
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| **Impact of Macroeconomic Conditions:**Please provide details of any current or anticipated future impact on business operations specifically resulting from macroeconomic conditions in the UK e.g ongoing impact of COVID-19, rising cost of living etc. with an indication of the timing on any such interruption/events. |
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| **Exposure to Climate Change:**Since the 2021 Triennial Covenant Assessment Exercise has your organisation identified any climate related risks or opportunities which would impact on your current financial position or funding stream? If so, please provide details and proposed actions. |
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| **Other:**Please detail any other relevant information in relation to your organisation which might affect NILGOSC’s assessment of covenant strength. |
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| **I confirm that, to the best of my knowledge, the above information is accurate and complete.**  |

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| Name: |  | Date: |  |
| Signature: |  | Position: |  |

**This form must be signed by the Chief Executive**