

# Transfer Quotation Request Form

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If you have benefits in another pension scheme(s), you might want to consider transferring them to the Local Government Pension Scheme (NI). If you would like NILGOSC to investigate a transfer on your behalf, please complete and return this form, providing as much information as possible, within one month of receipt of your Scheme Welcome Letter. If you would like NILGOSC to investigate more than one transfer request, please use an additional LGS8 form which can be downloaded from our website at [www.nilgosc.org.uk/document-category/forms-for-members/](http://www.nilgosc.org.uk/document-category/forms-for-members/). Returning the completed LGS8 form to NILGOSC is only the first step of the pension transfer process and is not your written authority to transfer.

**For the LGPS(NI) to accept a transfer of pension rights, NILGOSC must request the payment of the transfer whilst the member is in their first year of scheme membership. Any transfer payment requested after this time period cannot be accepted, unless in exceptional circumstances. Please complete this form and email to: [admin1post.incomingemails@nilgosc.org.uk](mailto:admin1post.incomingemails@nilgosc.org.uk) or upload it via your My NILGOSC Pension Online account.**

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## Section 1 – Member Details

Surname

First name(s)

Title: Mr/Mrs/Miss/Ms/Other

Partnership status

Home address

	Postcode	



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*Section 1 continued*

NILGOSC reference number

Date of birth

Telephone number

Personal email address

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**Section 2 – Current Employer Details**

Full name of employer

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**Section 3 – Former Scheme Details**

Full name of employer

Dates of service:

Scheme name and address

Postcode

Surname known by in this scheme

Reference number/Policy number



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*Section 3 continued*

I give authority to NILGOSC to obtain any information required in connection with my pension benefits from the administrators or trustees of any pension scheme of which I am or have been a member. I understand that I cannot transfer pension benefits into the LGPS(NI) more than one year after my date of joining the LGPS(NI) Scheme.

**Member signature\***

**Date**

*\* By typing your name you are signing this form electronically. You agree that your electronic signature is the legal equivalent of your manual signature. You are also confirming that the information you have provided is accurate and complete, to the best of your knowledge and belief.*