Public Sector Pensions Authority PSPA4 Retirement Benefit Estimate Request

This form is to be completed when you are requesting an estimate of pension benefits. Some estimates will carry a charge and information on charges can be found on the Schedule of Charges for Pension Benefits Estimates available on the resources pages of our website www.pspa.im.

Part 1 – About Yourself	
PSPA Scheme Reference Number	
Title	Address
	, dui ess
Full Name	
Contact Number	
National Insurance Number	
Email Address	
Part 2 – Estimate Type	
Please select the type of retirement benefits estimate	you would like the PSPA to provide to you.
Date or Age I would like to/I am expecting to r	etire from
Confirmed Retirement/Claim Dates:	

Estimate Required	Туре	Calculate to date/age	Charge (VAT included)
	Annual Benefit Statement	Please provide me with a copy of my latest annual benefit statement.	None
	Confirmed Retirement	I will be retiring and my employer has confirmed my last day of paid employment as above. Please provide me with a pension estimate to this date.	None
	Deferred Retirement	I will be claiming my pension from the above date. Please provide me with a pension estimate to this date.	None
	Confirmed III Health	Please provide me with an estimate of pension benefits when I retire from ill health. A claim form has been accepted and I am due to retire on the above date.	None

How we use your information: The PSPA will use the information that you have provided on this form for administering your scheme membership and processing the payment of your pension benefits. We may share your information to administer and pay your pension, enable us to prevent and detect fraud and mistakes, or as required by law. For more information about with whom we share your information and how long we keep your personal data and your rights, please refer to our Privacy Notice on our website at www.pspa.im

Unconfirmed Retirement/Claim Dates:

	At current or future date/age	Please provide me with a pension benefit estimate based to the above date/age.	£70 per date/age specified
	Hypothetical	Please provide me with an estimate to the above date/age. Please base this on a final pensionable pay of £ per annum and/or total pensionable service of years and days.	£70 per date/age specified
	Unconfirmed Ill Health	Please provide me with an estimate if I were to retire from ill health on the above date. A claim form has not yet been accepted.	£70 per date/age specified
All charges inclu	ıde VAT at a standar	d rate of 20%	

I have referred to the Schedule of Charges and I agree to pay the charges of £	_ and enclose a cheque
for the full amount (made payable to the Isle of Man Government)/ I will pay the fu	ıll amount by
credit/debit card*. I consent to the disclosure of information on this form for the purposes of	of verification and in
compliance with the Data Protection Act. I understand that the PSPA will retain this form for th	eir records.

*delete as appropriate

Print Full Name

Date

Please return to: PSPA, 3rd Floor, Prospect House, 27-29 Prospect Hill, Douglas, ISLE OF MAN, IM1 1ET, or if no payment is due, email to pensions@pspa.im. To pay by credit/debit card, you can either call into the office at the above address, or alternatively, call (01624) 685598.

Important Information

- 1. The costs quoted are for a single estimate.
- 2. If you require more than one estimate, then please complete a form and send a payment for each estimate request.
- 3. Estimates at multiple ages or dates will each be charged individually.
- 4. We will require full upfront payment by cheque made payable to the Isle of Man Government or by credit/debit card before we start processing chargeable requests.
- 5. Please specify any ages in years and months.
- 6. With the exception of hypothetical estimates, all estimates for active members will be based upon pensionable pay and pensionable service as at the last 31 March.
- 7. If a request is made by a member who is retiring and has confirmed his or her resignation with their employer, an estimate of benefits will be provided free of charge.
- 8. If a request if made by a member, who has been asked by their employer to consider voluntary or compulsory redundancy, VRS or MARS an estimate of benefits will be provided free of charge.