



The Greater Gwent (Torfaen) Pension Fund

administered by Torfaen County Borough Council

LOCAL GOVERNMENT PENSION SCHEME (LGPS)



COUNCILLOR - OPTING IN ELECTION FORM

TITLE	
SURNAME	
MAIDEN NAME (if applicable)	
FORENAMES (in full)	
MARITAL STATUS	
DATE OF BIRTH (Please attach copy birth certificate)	
NATIONAL INSURANCE NUMBER	
ADDRESS FOR CORRESPONDENCE	
PAYROLL NUMBER	
EMPLOYING AUTHORITY	
POST HELD	COUNCILLOR

- I wish to join the LGPS with effect from the next available pay period.
- I enclose a copy of my birth certificate.
- I declare that the details given above are correct to the best of my knowledge.

SIGNED: _____

DATE: _____

Please return the form to your Council's payroll team.