



# Approval form in respect of Redundancy or Business Efficiency retirement for LGPS employers.



**To be completed by the employer where approval has been granted for an LGPS member to retire aged 55 or over on the grounds of either Redundancy or Business Efficiency.**

|                                  |                         |
|----------------------------------|-------------------------|
| <b>Name of LGPS member</b>       |                         |
| <b>National Insurance number</b> |                         |
| <b>Name of employer</b>          |                         |
| <b>Leaving date</b>              |                         |
| <b>Reason for leaving</b>        | (delete as appropriate) |

Estimated strain costs of £  have been provided by the Pensions Section.

I confirm that I have agreed to finance these costs.

**For completion by Leics County Council and ESPO only:**

**Cost Code:**

**The Pensions Section will issue an invoice in respect of the costs associated with this retirement. If you require a PO number to be included in your invoice, please enter it in the box below.**

**Certification:**

I certify that I am authorised to sign this form on behalf of the above named employer, have checked that all sections of this form are complete and that the information contained within this form is correct.

I understand that for pension benefits to be paid, an ePen3 leavers form must also be supplied and I have arranged for this to be completed and sent to the Pensions Section.

**Form submitted by:**

|                      |  |
|----------------------|--|
| <b>Name</b>          |  |
| <b>Job title</b>     |  |
| <b>Email address</b> |  |
| <b>Phone number</b>  |  |
| <b>Signed</b>        |  |
| <b>Dated</b>         |  |

Complete all sections of this form fully and return to: **[pensions@leics.gov.uk](mailto:pensions@leics.gov.uk)**

