

## **TPT Retirement Solutions**

## Transfer to new Benefit Structure

**Defined Benefit** 

All members who wish to transfer to a new benefit structure are required to sign and complete sections 1 and 2 and return the form to their employer. Employers should complete sections 3 and 4 and return the form to TPT Retirement Solutions.

## 1 | Your details

Full Name:	
Membership Number: M	
Address:	
Postco	ode:
I am applying to switch to the following benefit structure (your employer will owhich benefit structure(s) are open to you)	confirm
I wish the change of benefit structure to take effect from:the first of a month).	(the effective date should be

- I understand that if I wish to switch benefit structure in the future, this will be limited to the benefit structure(s) made available by my employer at that time.
- Iunderstand that if I choose to move benefit structures any Final Salary benefits built up previously will no longer be linked to my future salary increases.
- I understand that the decision to move from one benefit structure to another cannot be reversed at a later date.

2   Member's signature	
Signed:	Date:
Full Name:	
3   Employer details	
Name of Organisation:	
Employer Reference Number: E	
I confirm the member has chosen to transfer into the operated by our organisation.	benefit structure
I confirm the future service contribution rates are as shown and Payroll had amend the contributions payable.	ave been informed to
Employer Future Service Contribution Rate:%	
Employee Future Service Contribution Rate:%	
4   Employer's signature	
I certify that we, as the employer, agree to this member transferring to detailed above and agree to deduct contributions at the rate applicable structure from the effective date shown in section 1.	to the new benefit
Signed:	Date:
Full Name:	
Position:	

