

Transfer Value Authority Form (TV1) - Occupational and Personal Pensions

Do you wish to investigate a transfer?	Yes	No
--	-----	----

Note: A transfer in request must be **made within 12 months of joining**, however your employer does have the discretion to extend this period. If a request is received outside 12 months of joining, we will have to contact your employer to obtain their permission. More information regarding **transferring pension rights** can be found on our website at www.worcestershirepensionfund.org.uk

Surname		Forenames	
Maiden name		N.I. number	
Date of birth		Postcode	

Current address	
Previous address	

I have been a member of an occupational pension scheme:

Previous Employer Name	
Name and Address of Pension Scheme Administrator	
Reference Number (if known)	
Start date of employment	
End date of employment	

I have previously contributed to a personal pension / private pension scheme:

Name of pension provider	
Address of Pension Scheme Administrator	
Policy number	

I hereby give permission for information in connection with this transfer request to be disclosed to Worcestershire Pension Fund. Further information on how your data is processed can be found in our privacy notice:

<https://www.worcestershirepensionfund.org.uk/privacy-notice>

Please ensure that you sign this form by hand and return it to us by post. Unlike on our other forms, we cannot accept a digital signature or other digital evidence, as we have found that other pension schemes will not process a transfer request without us demonstrating to them that our transfer request form has been signed by hand.

Please supply a photocopy or digital evidence of your birth certificate or passport, plus (if married) your marriage certificate, as we will need evidence of age and marital status to progress any transfer or to pay any benefits.

Signature		Date	
-----------	--	------	--