

Quotation – Election to buy out the standard early retirement reduction

EBSBOQUOT

Please read the factsheet at www.2015.sppa.gov.uk before completing this form.

SECTION 1 – PERSONAL DETAILS

Superannuation number:

Surname:

Former surname (if applicable):

Forenames (in full):

Title:

Mr Dr Ms Mrs Miss

If other, please specify:

Date of birth (e.g. 15/04/1973):

/ /

Contact address:

Postcode:

Home telephone number (including STD code):

Mobile telephone number (including STD code):

Email address:

National Insurance number:

SECTION 2 - OPTIONS

I request a quotation to purchase a buy out agreement up to a maximum of 3 years as below:

1 year 2 years 3 years

*only if relevant
(see factsheet)

months

Current employer details

Name of employer:

Contact address:

Pay reference number:

Postcode:

Continued overleaf.

SECTION 2 - Continued**If you are currently working in more than one employment contract please provide details.**

Name of employer:

Contact address:

Pay reference number:

Postcode:

Signed:**Date:** / / **Completed Form**

Please return the completed form to:

SPPA,
7 Tweedside Park,
Tweedbank,
Galashiels
TD1 3TE.

