

Police Pensions Scheme

PSOD Team CETV Application

National Insurance Number

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PART ONE : Your Personal Details

Surname Forename(s)

Maiden Name Title (please circle correct option below)

Mr / Mrs / Miss / Ms / Other

Date of Birth (dd/mm/yyyy)

		/			/				
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Job Rank

PART TWO : Your contact Details

Contact Address :

Post Code :

Telephone Number :

Mobile Number :

E-mail :

PART THREE : CETV Details

Date of Marriage (dd/mm/yyyy)

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Date of Separation (dd/mm/yyyy)

		/			/				
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Is your case to proceed under Scots Law or English Law? (please tick)

Scots Law

English Law

Signature

Date

NOTE : Under current legislation the SPPA has three months in which to issue your CETV from the date we receive this form. Please put any other relevant information (e.g. Solicitors name & address) which you feel may help us on the reverse of this form.

Once you have completed the form, post it to us at : PSOD Team, SPPA, 7 Tweedside Park, Tweedbank, Galashiels, TD1 3TE

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Please record any other relevant information here :