

All personal information will be held in accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.

Before you begin filling out the form, please make sure you have:

- **Used the Remedy Opt-out Member Contributions Estimator**
This handy tool helps you estimate how much you might need to pay if you decide to buy back service into the scheme.
- **Taken a screenshot of Estimator results**
- **Checked your personal details**
Take a moment to review your information to ensure everything is accurate.
- **Completed the declarations section**
Don't forget to **sign, date, and tick** the boxes at the end of the form.

Your completed form and supporting evidence should be submitted to:

ContingentDecisionsCSP@finance-ni.gov.uk

We'll check your form and supporting evidence when we receive them and let you know if we need any more information.

Title:

First Name(s):

Surname:

Current Address:

Current Postcode:

Please provide any additional information to help us locate you. e.g. if you're no longer an active member, if we hold a previous name or address during the time of your pension membership:

Nat Ins Number:

Date of Birth:

(dd/mm/yyyy)

Member Number:

(If known)

Contact Tel Number:

Personal Email Address:

(it is recommended that members use a personal email address rather than a work email)

Correspondence will be sent via email.

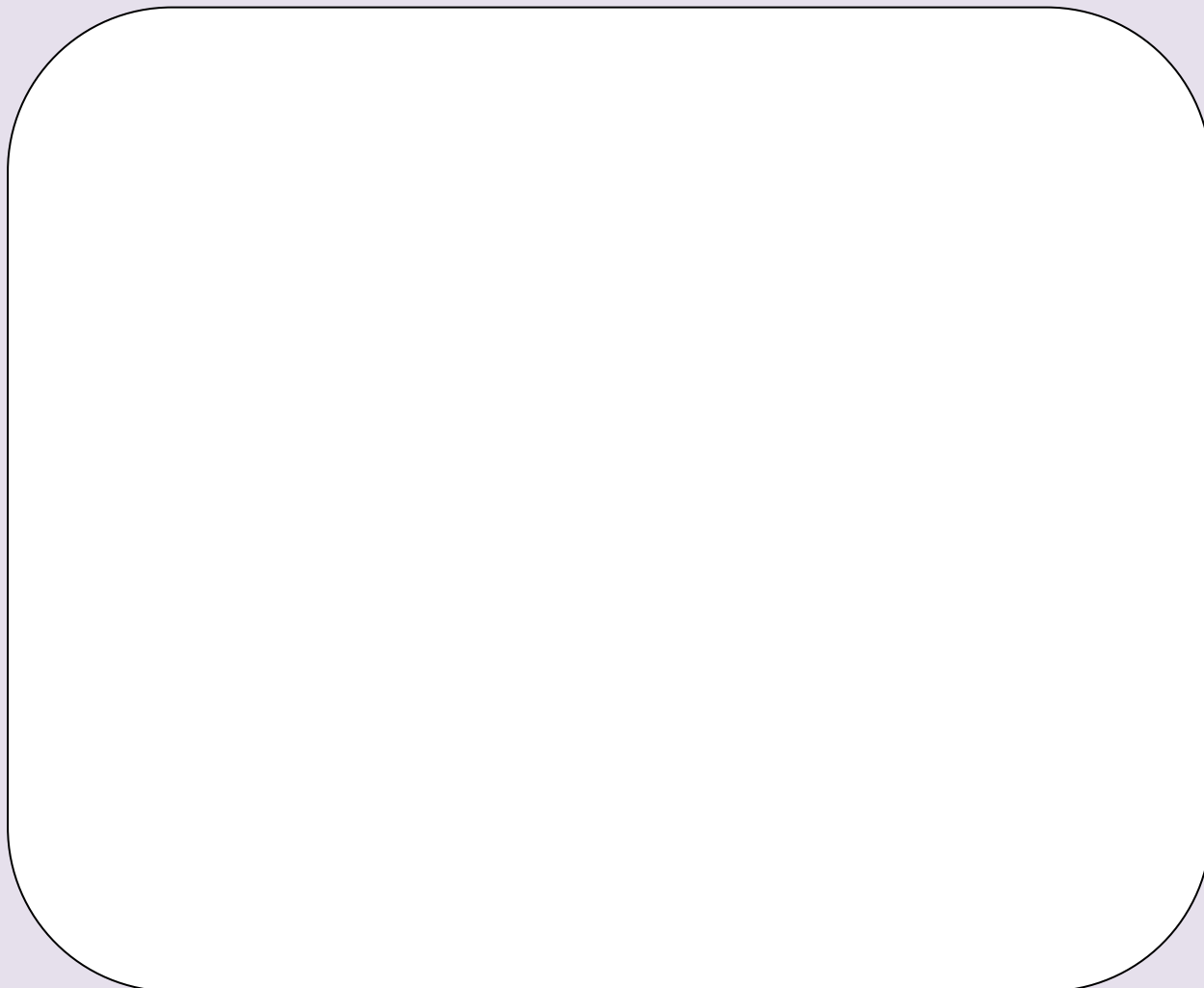
If you would prefer postal correspondence, then please tick this box:

Please detail the reasons for choosing to opt-out of the pension scheme, providing details of what you would have done differently. Clearly articulate how your circumstances would have differed had you not made your contingent decision and how this was driven by the unlawful transitional protection rules. The evidence for this may include independent advice (taken at the time of the decision and clearly quantifiable) and/or evidence from supporting bodies (charities / pensions experts):

Please provide details of what evidence you have provided to support your application e.g. emails, letters, policy documents. You will also need to include screenshots of the 'Remedy Opt-out Member Contributions Estimator'. **Please note** applications submitted with supporting evidence are more likely to be successful. Evidence examples could include opt-out application form or correspondence from employer/Civil Service Pensions:



Please provide details below of any additional supporting evidence you want us to assess to support your application:



Additional Information

Would you like to provide any more information to support your application?

Declaration

I declare the information I have provided is true to the best of my knowledge

I confirm that I have used the Remedy Opt-out Member Contributions Estimator Tool and have attached a screenshot of the results.

I understand that, in the event of my application being accepted, I will have to pay back the missed contributions plus interest. The cost will be calculated at the time the application is accepted.

By ticking this box I declare that I am the person named on this form and that the information provided is true and accurate. I also declare that I am aware that the provision of false information may lead to prosecution.

Date: (dd/mm/yyyy)

Please submit completed form along with supporting evidence to:

ContingentDecisionsCSP@finance-ni.gov.uk