**Wessex Water Pension Scheme (BWBSL)**

**Defined Contribution (DC) Section**

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| --- |
| **INCREASE IN CONTRIBUTION RATE TO STANDARD LEVEL** |

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|  |  |  |  |
| --- | --- | --- | --- |
| Your contribution | Company contribution | Total contributions | Insurance cover |
| 5% | 8% | 13% | Lump sum – 4 x salaryAdditional Lump Sum 4 x Salary where there is an eligible spouse/dependant  |

* I have read the information provided and agree to increase my contribution rate to the standard level from the start of the next pay period.
* I note my contribution will increase from 3% to 5% of my pensionable pay.
* I understand the Company contribution will increase from 5% to 8%.
* I note my death in service benefits will increase to a lump sum of 4 x salary, plus an additional lump sum of 4 x salary where I may leave an eligible spouse/dependant.

Please ensure you have completed an **Expression of Wish form** if you have not already done so.

You should consider if you wish to continue in the default option or switch your investments to alternative funds. Please review to the **Investment Guide** or [**http://www.legalandgeneral.com/wessexwater**](http://www.legalandgeneral.com/wessexwater)

for more information on the funds available.

You should also consider whether the scheme retirement age of 65 is appropriate for your retirement plans. To select an alternative retirement date please register for online access to the L&G member site where you can amend your retirement date or you can advise the pensions team by email; pensions@wessexwater.co.uk

I understand that this request is not binding on the Trustees and does not in any way restrict their powers under the Rules of the Scheme. I understand that if my circumstances change I will advise the Trustees.

Personal data provided on this form will be handled by the Trustee of the Wessex Water Pension Scheme,

as a data controller, and by its authorised third parties, in accordance with applicable data protection law

and as described in the Trustee’s fair processing notice.

If you would like any further information then you can obtain a copy of the Trustee’s fair processing notice by contacting the Pensions Team, Wessex Water, Claverton Down, Bath, BA2 7WW.

Email pensions@wessexwater.co.uk

Signed …............................................................…….. Date..................................................

Full name ……………………………………………………. Employee number………………..…

(capital letters)

**Please return this form to : Pensions team, Wessex Water, Claverton Down, Bath, BA2 7WW**