

Firefighter Pension Scheme

Nomination of Dependent Partner for Survivor's Pension

Benefits payable upon the death of a member of the New Firefighters' Pension Scheme include pensions for children and for a surviving spouse or civil partner. The Scheme also provides benefits, similar to those for a surviving spouse or civil partner, for a partner with whom the member has not entered a marriage or formed a civil partnership but where:

- An appropriate nomination and joint declaration have been made, and
- the Fire & Rescue Authority are satisfied that, at the date of the firefighter's death, the nominated partner was living with the firefighter in an exclusive, committed long-term relationship (normally for at least two years) and that the conditions for making the nomination and joint declaration are still met.

The conditions for nomination and joint declaration are that –

- both the firefighter and nominated partner must be free to marry or enter into a civil partnership in the UK (a guide to people who are not allowed to marry or enter into a civil partnership can be obtained from your pensions administrator); and
- either the nominated partner must be financially dependent on the firefighter or the firefighter and nominated partner must be financially interdependent.

If you and/or your partner are currently married or have a civil partner then this type of nomination cannot be made. Upon your death, your spouse or civil partner would automatically receive a dependent's benefits under the provisions of the New Firefighters' Pension Scheme. This would be the case until such time as the marriage or civil partnership is annulled or dissolved. Only then would a partner nomination be acceptable, and be implemented.

There is no requirement for proof at nomination, but would be needed, to the satisfaction of the Fire & Rescue Authority, demonstrating that the relationship had existed for at least two years up to that date. The Authority may waive the two year minimum at their discretion.

It is never easy to ask for information when a person dies, but the Authority has to do this to determine entitlements to benefits. You and your partner should be aware that this will happen. For example the Authority may ask for evidence that you lived in a shared house with shared household spending. Also evidence of a joint bank account, a will or life insurance policy naming the other partner as the main beneficiary. This is the sort of evidence that the Authority would seek. There would be a right of appeal if the authority decided not to pay any benefits, and your partner believes that they have an entitlement.

If you wish to nominate your partner for dependant survivor benefits, please complete the rest of this form and ensure it is signed and witnessed. Both partner's must complete the declaration on the other side of this form, and have the declaration witnessed.

It is vital that you keep us up-to-date with any changes in your circumstances

For assistance, or to submit the completed form, please contact;

HR Administration Service, Wedgnock House, Wedgnock Lane, Warwick CV34 5AP

Email: hradministration@warwickshire.gov.uk Telephone: 01926 738444



Personal Details

Your Details

Surname			
Forename(s)		Title	
National Insurance Number		Date of Birth	
Address			
Town/City			
Postcode			

Your Nominated Partner's Details

Surname			
Forename(s)		Title	
National Insurance Number		Date of Birth	
Address			
Town/City			
Postcode			

Declaration

We confirm that

- we have lived together for years, during which time our financial affairs have been interdependent (or my nominated partner has been financially dependant upon me);
- we are in an exclusive, committed relationship with each other, and we intend to continue in this relationship in this relationship indefinitely;
- we are mutually responsible for each other's welfare;
- we are not related in a way that would prevent marriage or civil partnership;
- neither of us is married to, or in a civil partnership with, anyone else;
- neither of us is currently nominated as the partner of anyone else.

Scheme member signature		Date	
Nominated partner signature		Date	

Witnessed by

Signature of Witness		Date	
Address			
Town/City			
Postcode			

FOR OFFICE USE ONLY	DATE		DATE	HRMS ID	Comments & Documents
Received		Registered By			
Registered on		Copy to Pensions			