

Employment and Support Allowance

Office stamp

Our phone number is

Code	Number
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Textphone users with speech or hearing difficulties call

Code	Number
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If you get in touch with us, tell us this reference number

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Date

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About your claim for Employment and Support Allowance

You recently made a claim for Employment and Support Allowance.

We need to ask you some more questions about the pension you and your partner are getting or waiting to get.

If you or your partner, if you have one, are getting a pension income, your Employment and Support Allowance may be affected. We use 'partner' to mean

- a person you are married to or a person you live with as if you are married to them, or
- a civil partner or a person you live with as if you are civil partners.

We use 'pension income' to mean money you have coming in from

- occupational pensions
- personal pension or a retirement annuity contract.
- Armed Forces Compensation Scheme as an occupational pension
- public service pensions
- stakeholder pensions
- pension from a self-employed pension scheme
- permanent health insurance payments arranged by an employer, when the contract of employment has ended
- permanent health insurance payments arranged by an employer, when you still have a contract of employment
- pension protection fund payments due to employer insolvency
- regular pension payments
- an annual compensation payment from a previous job
- lump sum payments from a pension. These could be annually, or monthly
- pension paid to you as a beneficiary because of the death of a member of a pension scheme.

About your claim for Employment and Support Allowance continued

Please answer the questions on the following pages, sign the **Declaration** and send the form back to us as soon as you can.

Use the envelope we have sent you. It does not need a stamp.

When we get your reply back we will make sure you are getting the right amount of Employment and Support Allowance.

Please make sure you answer all the questions on the form that apply to you and your partner.

If you need help or advice

If you want to ask us anything about this form, please get in touch with us. Our phone number and address are at the top of the front page.

Your reply

	You	Your partner
Are you or your partner getting or waiting to get a pension? If you have answered No to both of these questions go to Part 3 .	No <input type="checkbox"/> Yes <input type="checkbox"/> Please go to Part 1 .	No <input type="checkbox"/> Yes <input type="checkbox"/> Please go to Part 1 .

Part 1 – Pension income details

We need to know about any pension income that you have because it may affect the amount of Employment and Support Allowance you can get.

Please give us proof of your pension income. For example

- a letter of entitlement from your employer or insurance company who pay the pension
- a payment advice notice from your pension provider, or
- a current wage slip showing details of your pension income.

We need to see original documents, not photocopies. You do not need to send proof of a payment from the Armed Forces Compensation Scheme or Permanent Health Insurance.

Your or your partner's first or only personal pension income

	You	Your partner
What type of pension is it?	<input type="text"/>	<input type="text"/>
Please tell us the name and address of your pension provider	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode
Their phone number	Code <input type="text"/> Number <input type="text"/>	Code <input type="text"/> Number <input type="text"/>
What is your pension or policy reference number?	<input type="text"/>	<input type="text"/>
How much pension is due before anything is taken away?	£ <input type="text"/>	£ <input type="text"/>
What is taken away?	£ <input type="text"/> for <input type="text"/> £ <input type="text"/> for <input type="text"/> £ <input type="text"/> for <input type="text"/>	£ <input type="text"/> for <input type="text"/> £ <input type="text"/> for <input type="text"/> £ <input type="text"/> for <input type="text"/>
How much pension is due after everything is taken away?	£ <input type="text"/>	£ <input type="text"/>
How often is your pension paid? For example weekly, four-weekly, monthly, quarterly.	<input type="text"/>	<input type="text"/>
If your pension increases, when is the amount of your pension due to change?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
How much will it increase by?	£ <input type="text"/>	£ <input type="text"/>
When will you get the first payment which includes the change?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>

Part 1 – Pension income details continued

	You	Your partner
Did you or your partner choose to take a regular income from the pension scheme, rather than take an annuity?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Is this the most you or your partner can get?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Your or your partner's second personal pension income

What type of pension is it?	<input type="text"/>	<input type="text"/>
Please tell us the name and address of your pension provider	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode <input type="text"/>	Postcode <input type="text"/>
Their phone number	Code <input type="text"/>	Code <input type="text"/>
	Number <input type="text"/>	Number <input type="text"/>
What is your pension or policy reference number?	<input type="text"/>	<input type="text"/>
How much pension is due before anything is taken away?	£ <input type="text"/>	£ <input type="text"/>
What is taken away?	£ <input type="text"/> for <input type="text"/>	£ <input type="text"/> for <input type="text"/>
	£ <input type="text"/> for <input type="text"/>	£ <input type="text"/> for <input type="text"/>
	£ <input type="text"/> for <input type="text"/>	£ <input type="text"/> for <input type="text"/>
How much pension is due after everything is taken away?	£ <input type="text"/>	£ <input type="text"/>
How often is your pension paid? For example weekly, four-weekly, monthly, quarterly.	<input type="text"/>	<input type="text"/>
If your pension increases, when is the amount of your pension due to change?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
How much will it increase by?	£ <input type="text"/>	£ <input type="text"/>
When will you get the first payment which includes the change?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Did you or your partner choose to take a regular income from the pension scheme, rather than take an annuity?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Is this the most you or your partner can get?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Part 2 – Other information

You can use this space to tell us if you have any other pension income, or anything else you think we might need to know about your pension income.

Part 3 – Disability Living Allowance or Personal Independence Payment

Are you or your partner getting or waiting to hear about a claim for Disability Living Allowance or Personal Independence Payment? No
Yes

Part 4 – Carer’s Allowance

Have you or your partner ever made a claim for Carer’s Allowance? No
Yes Please tell us the date you made this claim.

Tick **Yes** even if the claim was disallowed.

Part 5 – Declaration

- **I understand** that if I knowingly give information that is incorrect or incomplete, my benefit may be stopped and I may be liable to prosecution or other action.
- **I declare** that the information I have given on this form is correct and complete as far as I know and believe.
- **I understand** that I must promptly tell the office that pays my benefit of anything that may affect my entitlement to, or the amount of, that benefit.
- **I agree** that the Department for Work and Pensions may ask any of the people or organisations mentioned on this form for any information which is needed to deal with
 - this claim for benefit
 - any request for this claim to be looked at againand that the information may be given to that organisation or to the Department.
- **I also understand** that the Department may use the information which it has now or may get in the future to decide whether I am entitled to
 - the benefit I am claiming
 - any other benefit I have claimed
 - any other benefit I may claim or be awarded in the future.

Signature

Date