

Auto Enrolment Opting-out form

This form is to be completed **ONLY** if you wish to opt out of pension saving arising from being Auto Enrolled into the Siemens Benefits Scheme.

PLEASE USE BLOCK CAPITALS

Surname:	<input type="text"/>								
First Names:	<input type="text"/>								
Employing Company:	<input type="text"/>								
Employment Location:	<input type="text"/>								
National insurance number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Date of birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>

What you need to know:

- Your Employer cannot ask you or force you to opt out.
- If you are asked or forced to opt out, you can tell the Pensions Regulator – see www.tpr.gov.uk
- If you change your mind, you may be able to opt back in – write to AskHR, PO Box 9011, Poole, BH12 9HW.
- If you stay opted out, your employer will normally put you back into pension saving in around three years.
- If you change your job, your new employer will normally put you back into pension saving straight away.
- If you have another job, your other employer might also put you into pension saving, now or in the future. This notice only allows you to opt out of pension saving with the employer you name above. A separate notice must be filled out and given to any other employer you work for, if you wish to opt out of that employer's pension saving as well.

Statements and warnings

- I wish to opt out of pension saving.
- I understand that if I opt out I will lose the right to pension contributions from my employer.
- I understand that if I opt out I may have a lower income when I retire.
- I understand that by opting out I forfeit the valuable benefits from the Scheme, including:
 - Protection for myself and my family in the event of my early retirement on account of ill health.
 - Protection for my family in the event of my death, whether before or after retirement.

I confirm I personally submit this notice to opt out of a workplace pension scheme.

Confirmation of intention to opt out

Signature:	<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>
------------	----------------------	-------	----------------------	----------------------	----------------------

Please note the completed form must be received by AskHR within one month of the date of your letter confirming your auto enrolment in the Investor Plan section of the Siemens Benefits Scheme.

Your completed form should be scanned and returned to AskHR via HR Direct accessible from the HR Intranet. Select Pensions – Investor Plan then Auto-Enrolment.

If you do not have intranet access please send the signed form to AskHR, PO Box 9011, Poole, BH12 9HW.