

# Help using this Veterans UK PDF form

## About this form

- **You must download and save this form to your computer before using it**
- You can save data typed into this PDF form if you use the latest version of **Adobe Acrobat Reader**
- To download the latest version of Adobe Acrobat Reader free of charge go to the Adobe website
- This means that you do not have to complete this form in one session

## Helpful information for using this form

- Save the form to your computer
- After completion print the form
- Sign the form in black pen
- Post the form using the address given
- **If you have an enquiry for the Armed forces Pension Scheme, please call the JPAC Enquiry Centre on 0800 085 3600 or email [DBS-PensionsHelp@dbspv.mod.uk](mailto:DBS-PensionsHelp@dbspv.mod.uk)**

## The form will not save in

- older versions of Adobe Acrobat Reader
- other pdf readers, for example Preview on a Mac or Foxit on a PC

**We have been made aware of issues when using Apple products such as Iphones and I pads to complete this form.**

**You may be unable to save or re-open it due to updates to Apple products since this form was created.**

**Work is being undertaken to transform our forms and systems but until this is complete, we ask that you find an alternative device, if possible, or print the form and complete it by hand.**

## Feedback

- We would like your feedback about this form. We will only use any comments to improve future versions
- Please email your comments to: [DBS-OPTaC@mod.gov.uk](mailto:DBS-OPTaC@mod.gov.uk)
- **Please do not send this form or any personal information to this email address. It is for feedback comments only**

**PLEASE NOTE YOU MUST SIGN THIS FORM USING A BLACK PEN. WE CANNOT ACCEPT THIS FORM BY EMAIL**

**Intentionally left blank**



# Ministry of Defence

## Armed Forces and Reserve Forces Pension Schemes Allocation of pension (AFPS05 / RFPS05 / AFPS15)

**Important Information – Please submit this form within the 6 months immediately prior to your pension first coming into payment.  
This form will be rejected if submitted more than 6 months prior to your pension first coming into payment.**

**Please Note - This form must be returned by post. Copies received by e-mail will not be accepted.**

### Part A – Your Details

First Name

Address

Surname

Post code

Service Number

National Insurance Number

Date of Birth (dd/mm/yyyy)

Telephone Number – including Area code

Email Address

### Part B – Allocation of Benefit (Please tick the appropriate box)

I wish to allocate a portion of my pension(s) to the person/people below who is/are financially dependent upon me. I acknowledge that, should the allocatee die before me, the amount allocated will **not** be restored to me. I understand that this allocation becomes payable in the event of my death. I understand that where I have Accrued Rights to one or more a legacy pension schemes I am required to allocate on a per scheme basis. Once my pension(s) become payable, I cannot cancel the allocation(s). (Note: members can apply to surrender up to 37.5% of their pension during their lifetime so that after their death, allocated dependants will receive an income for life.) The scheme actuary calculates the payments which will be based on the dependant's age and sex.

I have read and understood the statement above

## Part B – Allocation of Benefits - continued

I wish to allocate a percentage of my Pension Benefits as follows:

Percentage (to a maximum of 37.5%)  % AFPS 05

Percentage (to a maximum of 37.5%)  % RFPS 05

Percentage (to a maximum of 37.5%)  % AFPS 15

I wish to revoke a previous allocation I have made. **(please tick box(es) as appropriate)**

AFPS 05

RFPS 05

AFPS 15

## Part C – Allocatee Details

**Please Note:** Allocatees must be an existing contact on JPA. Please add allocatee(s) to your JPA contacts before submitting this form

If you do not have access to JPA please tick this box

First Name

Surname

Relationship

Gender

Address   
  
  
Postcode

Male  Female

Date of Birth (dd/mm/yyyy)

Telephone Number – including Area code

Email Address

### Part C – Allocatee Details - continued

Is this person your legal next of kin?

Yes

No

Is this person your additional allocatee?

Yes

No

This nominee is to be provided with communications from the Service Welfare Organisations?

Yes

No

### Part D - Data Protection

#### How the MOD collects and uses personal information

The Ministry of Defence (MOD) is committed to protecting the privacy and security of your personal data and the [MOD Privacy notice](#) explains your rights and provides information that you are entitled to under UK data protection legislation. It is important that you read this notice, together with any other privacy notice that may be provided when we collect or process personal information about you so that you are aware of how and why we are using such information. The [MOD Personal information charter](#) contains the standards you can expect when we ask for, hold, or share your personal information and your rights under the law.

### Part E - Declaration

#### I confirm that

- the information I have given is accurate and complete to the best of my knowledge and belief.

#### I understand that

- I must immediately tell the MOD of anything that may affect my entitlement to, or the amount of, payment made under any scheme administered by Veterans UK, including any change of address.
- if I knowingly give false information, I may be liable to prosecution.

#### I agree

- to refund any sum paid as a result of this allocation in the event that an overpayment is made for any reason.

**Remember – You must sign this form yourself if you can, even if someone else has filled it in for you. If a representative who acts as a Power of Attorney or Appointee for the claimant is signing this form, they must enclose evidence to show that they are the legal representative.**

## Part F - Consent for email correspondence

Veterans UK is happy to conduct correspondence with customers via a nominated email address if that is their preference. There are some types of personal information we would not be able to include in an email correspondence, which are listed below:

- I authorise Veterans UK of the MOD to use email whenever possible in its correspondence with me via my nominated email address shown on the front of this claim form. I accept that the information may include my personal details excluding bank account numbers, National Insurance number, medical details and any other information that could compromise my identity.
- I understand that correspondence transmitted by email may be open to abuse because it is transmitting over an unsecured network. I accept that the MOD will not be liable for any loss, interception or unauthorised use of information transmitted this way. I am content for Veterans UK to correspond with me from the email address shown at the front of this claim form.

Do you wish to correspond via email?

Yes

No

## Part G – Signature of Applicant

Signature

Date dd/mm/yyyy

Fully completed and signed forms should be sent to:

**Veterans UK, Process Team, MP 335, Kentigern House, 65 Brown Street, Glasgow G2 8EX**

**Part H – Acknowledgement**



**Ministry  
of Defence**

*With compliments*

Your AFPS Form 3 dated    /    /    has been received

Freephone 0800 085 3600

Name

Address

Service Number

**Veterans UK**  
MP335  
Kentigern House  
65 Brown Street  
Glasgow  
G2 8EX