

2015 PENSION REMEDY CONTINGENT DECISION/COMPENSATION FORM

Submit to	DBSMPV-SSCL-Remedy-ContingentDecision@dbspv.mod.uk
Reference (Service Number)	
Date	

ADVICE FOR POTENTIAL CLAIMANTS

Compensation

Compensation may be payable for a Part 4 Tax Loss or a direct financial loss such as professional fees where expert advice has been required.

Contingent Decision

A Contingent Decision is a pension-related choice that would have been different if not for the transitional protection arrangements in place as part of the 2015 public sector pension reforms. Such decisions might include opting out of the pension scheme or making a transfer.

If we deem your claim to be related to Terms and Conditions of Service it will be forward as a Service Complaint to the appropriate Service authority.

You can make a compensation or contingent decision claim for the following reasons:

- A direct financial loss or a Part 4 tax loss arising from the transitional provisions and not addressed in the remedy process.
- A pension related decision which you made in connection to the transitional provisions which is not addressed in the remedy process.
- A career decision related to your Terms and Conditions of Service (TACOS).

Note: The 2015 Pension Remedy is concerned with addressing the impact of the transitional protection arrangements which were found to be unlawful. Please note that the 2015 Scheme is not unlawful and transferring members to the scheme was not unlawful.

You do not need to submit this form for AA tax adjustments. Members will be required to complete the HMRC adjustment tool to claim compensation for overpaid pension savings tax and lifetime allowance.

If you are considering making a claim you are advised to wait until you have received your first Remediable Service Statement (RSS) before submitting the claim, as this will provide the necessary information to allow you to assess your position and quantify any claim. You may need information from HMRC before you can submit a Part 4 tax loss claim.

If you believe you have a claim, please read the guidance notes below before completing the form, and submit along with relevant supporting evidence.

COMPLETION GUIDANCE NOTES

1. **Member Details.** This section requires the details of the person who was a member of the pension scheme and affected by the 2015 Pension Remedy.
2. If you are completing the form on behalf of the member, e.g. under a power of attorney, or as a person entitled to a dependant's pension derived from a deceased member's pension rights, you should also complete the second section.

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3. Ensure you provide contact details that will be valid for the duration of the decision period, including where the preference is to be contacted by telephone or email. This is particularly important as the timelines for a decision are limited and failure to respond to further enquiry may result in your case being dismissed.
4. **Outcome.** Briefly explain your submission and the outcome you seek.
5. **Background in Detail.** Start at the beginning and go through the facts in chronological order. Where relevant include:
 - a. Briefly describe what decisions you took, why you took them and the resources/advice you used to help you decide.
 - b. Gather evidence to support your claim, e.g., emails, letters, policy documents. Claims submitted without supporting evidence are likely to be rejected/delayed.
 - c. If relevant, state the alternative outcome you feel you were denied.
 - d. Where your claim is for reimbursement of costs incurred as a result of the discrimination or the remedy, be specific about:
 - the sources of advice. (e.g. name of advisor & organisation (civilian firm/military unit).
 - what advice was sought.
 - what advice was received.
 - what decisions were taken and when.
 - the impact of the decisions.
6. **Impact.** Does your claim concern an impact caused by the transitional protection rules that is not covered by the remedy? If so, you must be able to explain and evidence why you made your decision and how this impacted you. Clearly articulate how your circumstances would have differed had you not made your contingent decision and how this was driven by the unlawful transitional protection rules. The evidence for this may include independent advice (taken at the time of the decision and clearly quantifiable) and/or evidence from supporting bodies (charities / pensions experts).
7. If your concern refers to professional fees, please specify the cost incurred and provide an itemised receipt.
8. **Supporting Documentation.** You should gather your supporting evidence before you start your claim. The evidence must be submitted with the claim, and you will be able to send copies as attachments. It is important that you clearly mark the documentation, and we recommend you accurately reference the evidence provided when describing your case. This will draw the case officer clearly to the correct evidence.
9. **Completion.** If your claim relates to direct financial loss or Part 4 tax loss, complete Annex 1 with your bank details. These will be used to issue your payment if your claim is accepted.
10. Once completed, this claim and all supporting documentation should be emailed to:
DBSMPV-SSCL-Remedy-ContingentDecision@dbspv.mod.uk

All enclosures are to be labelled clearly and listed as part of the submission.
All online and email submissions will receive an automated response message.

Claim Form

Please tick in the relevant box below to indicate which statement best describes your issue	
A pension decision, direct financial loss or Part 4 Tax loss arising from the transitional provisions and not addressed in the remedy process.	
A career decision, where you are not claiming for direct financial or tax loss, related to your Terms and conditions of Service (TACOS).	

MEMBER DETAILS See Completion Guidance Note 1			
Surname and Initials:		Service Number:	
Date of Birth		Preferred Phone Number	
Current Address			
Postcode			
Email Address			
Enlistment Date:		End of Service (Termination) Date:	
AFPS Scheme – list all that apply (AFPS 75/05/15/RFPS/FTRS/ NRPS)		Opt Out Date (if applicable)	
Did you have any breaks in service		Dates of Enlistment / Discharge for each period of service	
Date Contingent Decision took effect?			
I confirm that I am content with MOD using the details provided to contact me with regard to this submission.			
Serving. I confirm that my JPA records are correct and up to date.			
Veterans. I confirm that the personal details provided are correct and up to date and that should any of these details change I will inform the Contingent Decision Casework Team accordingly. Casework and Appeals may be rejected if I fail to inform the Casework team			

If you are completing this form on behalf of a member or as Dependant of a deceased member, please provide your details below			
Forename		Surname	
Date of Birth		Preferred Phone Number	
Current Address			
Postcode			
Email Address Capacity in which you are completing this form. Relationship to the deceased member (if relevant)			

Contingent Decision Claim Details

1. State the outcome you want. – Be clear and specific about what is required. See Completion Guidance Note 2

2. Background in Detail. – See Completion Guidance Note 3

3. Impact – See Completion Guidance Note 4

4. Supporting Documentation – See Completion Guidance Note 5

Provide uploaded or hard copies of evidence that support your claim. This could include, independent advice, personal records, correspondence, career manager notes and emails. If your claim relates to a Part 4 tax loss, you will need to provide the necessary calculation from HMRC.

5. Submitting your claim – See Completion Guidance Note 6

Please see the address and further guidance on submissions at note 6.

6. Declaration

I confirm that I understand that, if I provide false information in or relating to this application, I may face civil action or prosecution, or both.

I declare that, where included, the information provided to HMRC in order to obtain a calculation, and the calculation itself, is correct and complete to the best of my knowledge and belief.

Name:

Date signed:

(signed electronically)

Annex 1 – Bank Details

If your claim relates to a direct financial loss or a Part 4 tax loss, please provide your bank details in the boxes below. These details will be used to issue your payment if your claim is accepted.

Full Name and Address of Bank / Building Society Account

Account Name

Account Number

Roll Number (if applicable)

Sort Code

Roll Number

UK account numbers usually have 7 to 10 numbers. Building society roll numbers or reference numbers can contain letters or numbers and can be up to 18 characters long. If you are unsure check the information with your account provider.