

WORKPLACE PENSION SCHEME ENQUIRY FORM



Dear Sirs

I have asked Grove Pension Solutions Ltd of New Grove House, Murray Road, Orpington, Kent BR5 3QY (FCA Number: 465051) to advise me on my pension benefits.

Please will you provide them with any information that they may require regarding my **current** workplace pension scheme with you.

Yours faithfully,

Name:

Signed:

Date:

Please complete the following information about you:

Title:	Forenames:	Surname:
Address:		
.....		Postcode:
National Insurance Number:		Date of Birth:
Marital status:		Spouse/Partner DOB:
Telephone Number Home:		Tel No Work:
Tel No Mobile:		Email address:

Please complete the following details about your current workplace pension scheme:

Name of Employer:

Who is your current Workplace Pension with?

What company administers this scheme (if known):

Policy Number or Member Number:

Pension scheme contact number (if known):

Please also enclose any correspondence / recent paperwork that you may have.

If you have any queries you can either telephone **01959 534 082** or email info@groveps.co.uk.

After completing, please return this and any other documents to us, either via the pre-paid envelope if one has been provided or, in your own envelope writing FREEPOST GROVE on the front. There is no need for a stamp or to write anything else.