Employer pension guide

# Annex 12A

Please complete the form below if you are undertaking a bulk transfer for staff either moving from or to an employer who participates in the CSP arrangements and e-mail it to GAD at [stafftransfers@gad.gov.uk](mailto:StaffTransfers@gad.gov.uk).

(Please copy in MyCSP to email address bulktransfers@mycsp.co.uk)

When GAD receive the necessary information, they will assign a unique reference number to the task and a member of their team to work on the exercise. They will advise you of this by e-mail and advise on the potential cost of the exercise.

GAD will discuss additional data requirements (including membership information) with you as work on the bulk transfer progresses.

Information Required:

|  |  |
| --- | --- |
| Name/address of employer |  |
| Name |  |
| Address |  |
|  |  |
|  |  |
|  |  |
| Details of contact at employer |  |
| Name |  |
| Telephone number |  |
| Fax number |  |
| Email address |  |
|  |  |
| Details of recipient for GAD invoices |  |
| Name |  |
| Address |  |
|  |  |
|  |  |
|  |  |
| Reference number (if any) |  |
|  |  |
| Details of employer’s MyCSP contact |  |
| Name |  |
| Telephone number |  |
| Fax number |  |
| Email address |  |
|  |  |
| Brief details of the bulk transfer |  |
| Incoming or outgoing? |  |
| Where to/from? |  |
| Title of bulk transfer |  |
| Approximate number of employees involved |  |
|  |  |
| Timescales |  |
| Date of (anticipated) contract award |  |
| Target date for completion of pensions negotiations |  |
| Expected date of transfer of employees |  |

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|  |  |
| --- | --- |
|  |  |
| Contact details of other party |  |
| Name of employer contact |  |
| Telephone / fax / email of above (if known) |  |
| Name of other party’s actuary (if known) |  |
| Telephone / fax / email of above (if known |  |
| Any other relevant information |  |

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