

SCPF

Opt out Form



WHO IS THIS FORM FOR?

This form is for active members of the Shell Contributory Pension Fund (SCPF) who wish to opt-out of the Fund with immediate effect. Please sign and date this form, and return to the Pension Administration Team who will complete section B.

Name:

Pension number:

Shell people number:

Location:

To the Trustee

I have read the "Opting out of the SCPF" factsheet and wish to opt-out of the SCPF with immediate effect and understand that:-

- My active membership of the SCPF will stop on the last day of the month following that in which the Pensions Administration Team receives this completed notification (opt-out date)
- I will no longer contribute to the SCPF after the opt-out date
- My pension benefits will become deferred from the opt-out date
- I will not be eligible to rejoin the SCPF or SOCPF as they are closed to new members
- I will no longer accrue pension benefits for any future service with Shell after the opt-out date
- I will not be covered for the Death in Service Lump Sum Benefit under these schemes
- I will no longer be covered for the Incapacity Benefits

I wish to investigate the possibility of transferring my SCPF (and SOCPF if applicable) benefits to another pension arrangement

(if applicable, please tick)

Signed:

Date:

Please complete the sections above and return the form to: The Pensions Administration Team, Shell International Limited, Shell Centre, London SE1 7NA or scan and email to UK-PensionsAdmin@shell.com

Section B - To be completed by the Pensions Administration Team who will forward to HR Operations to action.

Date Form Received:

Opt-Out Date:

Signed:

Date:

Full Name: