BR19

The Treasury

How to get a Pension Statement

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| **Who can get a Pension Statement** |

Any person who is not yet within 4 months of their State Pension Age can request a Pension Statement. If you are within 4 months of State Pension Age and you have not had a Retirement Pension claim pack, please advise us straight away.

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| **What your pension statement will tell you** |

**Basic Pension**

This is the part of your State Retirement Pension that is based on the National Insurance (NI) contributions you pay or are given as credits during your working life.

**Your statement will tell you in today’s prices the amount of basic State Pension you have earned already.**

**Additional Pension**

From April 1978 until April 2002 Additional Pension was a part of your State Retirement Pension that depends on your earnings since April 1978. It was also known as the State Earnings-Related Pension Scheme (SERPS). From 6th April 2002, SERPS was reformed with the introduction of the State Second Pension.

However, some employees are or have been contracted-out of this scheme into their employers or a Personal Pension scheme which will pay a pension instead of the State for the period of contracted-out employment.

**Your statement will tell you in today’s prices the amount of additional State Retirement Pension you have earned already.**

**Graduated Retirement Benefit**

This is the part of your State Retirement Pension that depends on the amount of graduated NI contributions you may have paid between 1961 and 1975 when the scheme was in operation.

**Your statement will tell you in today’s prices how much your Graduated Retirement Benefit is worth.**



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|  | | The Treasury |  |
|  | *Yn Tashtey* | | **Form BR19 May 2017** |
| **What to do now** | | | |

Please complete the attached form: **BR19 - Application for a Pension Statement**.

Check that you have answered all the questions that apply to you and check that you have signed and dated this form. Make sure that you keep these notes for your information.

If you need any help with –

* finding out when you will reach State Pension Age, **or**
* completing this form, **or**
* general questions about State Retirement Pension

You can contact us at:

Address: Pension Statement

Income Tax Division

The Treasury

Government Office

Douglas

Isle of Man

IM1 2RZ

Telephone: (01624) 685432

Email: pensionstatement@gov.im

Website: www.gov.im

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| **What happens next** |

It can take up to 6 weeks to prepare your statement.

Please keep this page for your information.

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|  |  | **Form BR19 May 2017** |

BR19

The Treasury

Application for a Pension Statement

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| **Part 1** | **About you** |  |

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| Title (please tick one box) | |  | | Mr | | | | |  | | Mrs | | | | |  | | Miss | | | | |  | | | Ms | | |  | Other |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Other names |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Any other surnames you have had |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Address |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth |  | | | | |  | | | | | |  | | | |  | | | | | | | | | | | | | | |
|  | Letters | | | | | | Numbers | | | | | | | | | | | | | | | | | Letter | | | | | | |
| National Insurance (NI) number |  | |  | |  | | |  | |  | | |  |  |  | |  | |  | |  |  | | |  | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Daytime telephone number |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |

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| E-mail address |  |  |



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|  | | The Treasury |  |
|  | *Yn Tashtey* | | **Form BR19 May 2017** |

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| **Part 2** | **Marital or Civil Status** |  |

What is your marital or civil status?

If you are no longer married or in a civil partnership we will ask you for more information later in the form.

Please tick the description that applies to you and answer the questions.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Single |  |  |  | | | |
|  |  |  |  | | | |
| Married |  | Date of marriage |  | |  |  |
|  |  |  |  | | | |
| Civil Partner |  | Date of formation of civil partnership |  | |  |  |
|  |  |  |  | | | |
| Divorced |  | Date of divorce |  | |  |  |
|  |  |  |  | | | |
| Civil partnership dissolved |  | Date of dissolution |  | |  |  |
|  |  |  |  | | | |
| Widowed or a surviving civil partner |  | Date of death of late spouse/civil partner |  | |  |  |
|  |  |  |  | | | |
| Are you getting or did you get? |  | Widow’s benefit or bereavement benefits |  |  | | |
|  |  |  |  | | | |
| Are you getting or did you get? |  | Bereavement Support Payment |  |  | | |

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| **Part 3** | **About your former spouse or civil partner** |  |

Only complete this part if

* you are widowed or a surviving civil partner
* you are divorced or your civil partnership has been dissolved
* you are about to be divorced or have your civil partnership dissolved, or
* your marriage or civil partnership has been annulled.

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| Title (please tick one box) | |  | | Mr | | | | |  | | Mrs | | | | |  | | Miss | | | | |  | | | Ms | |  | Other |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Other names |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Address |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Date of birth |  | | | | |  | | | | | |  | | | |  | | | | | | | | | | | | | |
|  | Letters | | | | | | Numbers | | | | | | | | | | | | | | | | | Letter | | | | | |
| National Insurance (NI) number |  | |  | |  | | |  | |  | | |  |  |  | |  | |  | |  |  | | |  | |  | | |
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| **Part 4** | **About Child Benefit** |  |

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| Are you getting Child Benefit? | | | | | | | |  |  | |  | | | | | | | |
|  | | | | | | | |  |  | |  | | | | | | | |
| Yes |  |  | No | |  |  | |  |  | |  | | | | | | | |
|  | | | | | | | |  |  | |  | | | | | | | |
| If No: | | | | | | | |  |  | | | | | | | | | |
| Have you received Child Benefit in the past? | | | | | | | |  |  | | | | | | | | | |
|  | | | | | | | |  |  | |  | | | | | | | |
| Yes |  |  | No | |  |  | |  |  |  | |  | |  |  | |
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| What is the date of birth of your youngest or only child? | | | | | | | | | | | | |  | | |  | |  |
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| What is the date of birth of your oldest child if you have more than one? | | | | | | | | | | | | |  | | |  | |  |

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| **Part 5** | **About what you are doing now** |  |

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| Please tick all the descriptions that apply to you | | |  |  | |
|  |  | |  |  | |
| Working for an employer |  |  | Registering for Jobseeker’s Allowance |  |  |
|  |  | |  |  | |
| Working for an employer and getting Employed Person’s Allowance |  |  | Getting Incapacity Benefit |  |  |
|  |  | |  |  | |
| Self-employed |  |  | Getting Carer’s Allowance |  |  |
|  |  | |  |  | |
| Self-employed and getting Employed Person’s Allowance |  |  | Getting Severe Disablement Allowance |  |  |
|  |  | |  |  | |
| Not working |  |  |  |  | |

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| **Part 6** | **About what you are doing now** |  |

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| We need to know about the NI contributions you are paying. Please tick all the boxes that apply to you. | | | | |
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| Paying full rate NI contributions | |  |  |  |
|  |  |  | | |
| Paying married woman’s or widow’s reduced rate NI contributions | |  |  |  |
|  |  |  | | |
| Paying Class 2 self-employed NI contributions | |  |  |  |
|  |  |  | | |
| Paying Class 3 voluntary NI contributions | |  |  |  |
|  |  |  | | |
| Not paying NI contributions | |  |  |  |
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| **Part 7** | | | **About self-employment** | | | | | | | | | | |  | | |
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| Are you self-employed? | | | | | | | | |
|  | | | | | | | | |
| Yes |  |  | | No |  |  | | |
|  | | | | | | | | | | |  | |  | | | | | | |
| If No:  Have you been self-employed in the past?   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | | | | | | | Yes |  |  | No |  | | | | | | | | | | | |  | |  | | | | | | |
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| |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | If Yes:  When were you self-employed? | | | | | | | |  |  |  | |  |  | From |  |  |  |  | to |  |  |  | | | | | | | | | | | | | | | | |  | |  |  |
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| **Part 8** | **Living outside the Isle of Man** |  |

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| We need to know if you have ever lived outside the Isle of Man since the age of 16. | | | | | | | | | | | | | | | | |
| Do not include holidays or periods in the armed forces. | | | | | |  | | | | |  | | | | | |
|  |  | |  | | |  | | | | |  | | | | | |
| Have you lived outside the Isle of Man since age 16? | | | | | | Yes | |  | | No | | |  |  | | |
|  |  | |  | | |  | | | | |  | | | | | |
| Which countries were you resident in, and when? | | | | | |  | | | | |  | | | | | |
|  | |  |  | | |  | | | | |  | | | | | |
| Country | |  | Dates of residence | | | | | | | |  | | | | | |
|  | |  |  | | |  | | | | |  | | | | | |
|  | |  | From |  |  | |  | |  | | to |  | | |  |  |
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|  | |  | From |  |  | |  | |  | | to |  | | |  |  |
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|  | |  | From |  |  | |  | |  | | to |  | | |  |  |
|  | |  |  | | |  | | | | |  | | | | | |
|  | |  | From |  |  | |  | |  | | to |  | | |  |  |
|  | |  |  | | |  | | | | |  | | | | | |
| When have you been resident in the Isle of Man? | | | | | | | | | | | |  | | |  |  |
|  | |  | From |  |  | |  | |  | | to |  | | |  |  |

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| **Part 9** | **Your signature** |  |

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| Please sign and date this form. | | | | | |
|  | | | | | |
| Your signature |  | Date |  |  |  |
|  |  |  |  | | |

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|  |  | **Form BR19 May 2017** |