## **Exchequer Services** LOCAL GOVERNMENT **PENSION SCHEME (LGPS)**



## **Change of address form**

Name:

Pay no:

National Insurance No:.

Current member / Pensioner / former member – pension not in payment yet (Please indicate current status above)

## **New address:**

New telephone number if applicable:

Email address:

Former address:	
Date effective:	
Printed name:	
Signed:	Date:



## **The Pensions Section Exchequer Services** Enfield Council PO Box 54

**Civic Centre** Enfield EN1 3XY

