## **SALARY SACRIFICE OPT IN FORM**



## Complete and sign this form if you wish to:

- Change how much is being contributed to your pension
- · Participate/Decline to participate in salary sacrifice (also known as salary exchange, salary conversion or SMART)

Your details	
Title: (Mr, Mrs, Miss, Dr etc)	Forenames:
Surname:	Tel. no:
Email address:	
Your employer:	NI number:
Change your contribution amount	
Please enter the new percentage of your pensionable pay you wish to contribute/sacrifice from your salary:	
% of my pensionable pay per month	
Tick this box if you wish to participate in salary sacrifice	
If you participate in salary sacrifice	If you do not participate in salary sacrifice
Your gross salary will be reduced by this amount and your employer will pay an equivalent gross amount directly to your pension as an additional employer contribution. There's no need to reclaim any tax relief. You also pay no National Insurance (NI) on the amount you choose to sacrifice.	pay (salary after tax and NI). Basic-rate tax relief will then be added
Further information on salary sacrifice can be found in your pension information pack or on your employer's pension website. Tax rules can change and benefits depend on personal circumstances.	
Please note, this change is subject to any limits your employer may impose on the frequency of changes or the amount you can sacrifice/contribute.	
New contributions will be invested in line with your current investment selections or your default fund if you haven't made an active choice. If you'd like to change where contributions are invested, please complete an Investment Choices Form or contact Hargreaves Lansdown on 0117 314 1795.	
Declaration and signature	
I understand that all contributions are bound by the scheme rules and Terms and Conditions for the HL SIPP. I haven't received personal financial advice from Hargreaves Lansdown about the suitability of this investment. I take responsibility for my decisions and if I have any doubts, I'll seek personal advice.	
Additional declaration if participating in salary sacrifice:	
I authorise my employer to reduce my contractual salary by the percentage indicated above and to contribute the equivalent amount directly to my employer's pension plan, in each case subject to any limits imposed by my employer. I understand this constitutes a change to my terms and conditions of employment with effect on and from the first day of the month immediately following the date of this declaration and that this and any subsequent changes are subject to the approval of my employer. If my salary changes, I understand that my salary sacrifice amount will also change pro-rata and that I won't be formally notified.	
Signature: X	Date: X D D M M Y Y

Please complete and return to the HR Department as soon as possible

Any questions? Contact the Pensions Helpdesk



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