Norfolk Pension Fund

LOCAL GOVERNMENT PENSION SCHEME

III-Health Retirement Certificate Early Payment of Deferred Benefit

Issue 8: (Nov 2021)

Employer can complete Member's Details electronically and forward to IRMP. **IRMP** completes form in ink and returns to Employer

NCC should send this form via PenDocs
All other employers should post a paper copy to:
Norfolk Pension Fund, County Hall, Martineau Lane, NORWICH, NR1 2DH

Certificate of continuing incapacity by an approved, independent, registered medical practitioner qualified in occupational health medicine in accordance with the Local Government Pension Scheme Regulations

Member's d	etails	
Surname	Title	
First Names		
NI Number		
Date /	Active LGPS Membership Ended	
Date of Application for Early Payment		
The IRMP should first check the date active LGPS membership ended (see form R53)		
If it ended on or after 1 April 2014, please complete Part A		
• If it er	If it ended on or after 1 April 2008 and before 1 April 2014, please complete Part B	
• If it er	If it ended on or after 1 April 1998 and before 1 April 2008, please complete Part C	
• If it er	nded before 1 April 1998, please complete Part D	
Then sign the declaration on the back page and return both forms to the employer		
Ganaral Notae		

General Notes

- The Independent Registered Medical Practitioner (IRMP) signing this certificate must have been approved by Norfolk Pension Fund
- The opinion given by the IRMP does not, in itself, give entitlement or otherwise to early release of the deferred benefits under the LGPS. Nor should the IRMP indicate to the deferred member such an award will or will not be made. The formal award determination is made by the employer (using form R53)
- The employer should complete page 1 of form R53 and send together with this certificate to the IRMP
- The IRMP should complete this certificate and return both forms to the employer.
- The employer should complete page 2 of R53 and return both forms to Norfolk Pension Fund.

Part A: LGPS Membership ended on or after 1 April 2014 Please tick either box A1 or A2 I certify, in my opinion the member A1: IS A2: **IS NOT** permanently incapable¹, because of ill health or infirmity of mind or body, of discharging efficiently the duties of their former employment which gave rise to the deferred benefits in the LGPS. If A1 has been ticked, please tick A3 or A4 I certify, in my opinion, as a result of ill health or infirmity the member A3: IS **A4: IS NOT** unlikely to be capable of undertaking gainful employment² before reaching normal pension age³, or for at least three years, whichever is the sooner. If box A3 has been ticked and the member was under age 55 at the date of application for early payment, please also tick box A5 or A6 I certify, in my opinion the member A5: IS A6: **IS NOT** permanently incapable¹, by reason of disability caused by physical or mental infirmity of engaging in any regular full-time employment.

Please read the footnotes and sign the declaration on the back page

Part B: LGPS Membership ended on or after 1 April 2008 and before 1 April 2014		
Please tick either box B1 or B2		
I certify, in my opinion the member		
B1: WAS B2: WAS NOT		
at the date of application for early payment of deferred benefits, and on the balance of probabilities, permanently incapable ¹ , because of ill health or infirmity of mind or body, of discharging efficiently the duties of their former employment which gave rise to the deferred benefits in the LGPS.		
If box B1 has been ticked, please also tick box B3 or B4		
I certify, in my opinion, as a result of ill health or infirmity the member,		
Constitution, and a recent of minimal, and meaning,		
B3 : DOES B4 : DOES NOT		
have a reduced likelihood of being capable of undertaking other gainful employment ² , within three years of the date of the application for early payment (or before age 65 if earlier).		
If box B3 has been ticked, please also fill in box B5		
I certify the date the person first became permanently incapable ¹ , because of ill health or infirmity of mind or body, of discharging efficiently the duties of the former employment which gave rise to the deferred benefits in the LGPS and met the criteria in B3, based on evidence available at that time, was		
/ / B5		
The date entered needn't correspond with the date of the member's application for early payment and may be earlier. It'll be used as the date from which benefits become payable.		
If box B3 has been ticked and the member was under age 55 at the date of application for early		
payment, please also tick box B6 or B7		
I certify, in my opinion, the member		
B6: WAS B7: WAS NOT		
at the date of application, permanently incapable ¹ , by reason of disability caused by physical or mental infirmity of engaging in any regular full-time employment.		
If box B6 has been ticked, please also fill in box B8		
I certify, in my opinion, the date the member became permanently incapable was		
/ / / B8		
The date entered may be the same as or later than the date in Box B5 and will be used as the date from which the pension should be increased under Pensions Increase legislation.		

Please read the footnotes and sign the declaration on the back page

Part C: LGPS Membership ended on or after 1 April 1998 and before 1 April 2008 Please tick either box C1 or C2 I certify in my opinion, the member C1: WAS C2: WAS NOT on the balance of probabilities, at the date of application for early payment of deferred benefit, permanently incapable⁴, because of ill health or infirmity of mind or body, of discharging efficiently the duties of the former employment which gave rise to their deferred benefit in the If box C1 has been ticked and the member was under age 55 at the date of application for early payment, please also tick box C3 or C4 I certify, in my opinion, the member C3: WAS C4: WAS NOT at the date of application for early payment, permanently incapable⁴, by reason of disability caused by physical or mental infirmity, of engaging in any regular full-time employment. This statement helps decide whether Pensions Increase legislation applies immediately If C1 has been ticked, please also tick C5 or C6 I certify⁵,in my opinion, the member C5: IS C6: **IS NOT** exceptionally ill, with a life expectancy of less than one year If C5 has been ticked, please also tick C7 or C8 I certify, to the best of my knowledge, the member C7: IS C8: **IS NOT** aware of their limited life expectancy

Please read the footnotes and sign the declaration on the back page

Part D: LGPS Membership ended before 1 April 1998		
Please tick either box D1 or D2 I certify, in my opinion, the member		
D1 : IS D2 : IS NOT on the balance of probabilities, permanently incapable ⁴ , because of ill health or infirmity of mind		
or body, of discharging efficiently the duties of the former employment which gave rise to their deferred benefit in the LGPS.		
If box D1 has been ticked, please also fill in box D3		
I certify in my opinion, the date the member became permanently incapable ⁴ was		
/ / D3		
and this would have been discoverable at that time, based on evidence available at that time. The date entered needn't correspond with the date of the member's application for early payment and may be earlier. It'll be used as the date from which benefits become payable.		
If box D1 has been ticked and the member was under age 55 at the date of application for early payment, please also tick box D4 or D5		
I certify, in my opinion, the member		
D4 : IS D5 : IS NOT		
permanently incapable ⁴ , by reason of disability caused by physical or mental infirmity, of engaging in <u>any</u> regular full-time employment.		
If box D4 has been ticked, please also fill in box D6		
I certify, in my opinion, the date the member became permanently incapable ⁴ was		
The date entered may be the same as or later than the date in Box D3 and will be used as the date from which the		
pension should be increased under Pensions Increase legislation.		
If D1 has been ticked, please also tick D7 or D8		
I certify ⁵ , in my opinion, the member		
D7 : IS		
exceptionally ill, with a life expectancy of less than one year		
If D7 has been ticked, please also tick D9 or D10		
I certify to the best of my knowledge, the member		
D10 : IS NOT		
aware of their limited life expectancy		

IRMP's Statement and Signature do / do not attach a copy of my full report / assessment and I certify: I have not previously advised on, given an opinion on or otherwise been involved in this case. I am not acting, and have not at any time acted, as the representative of the member, the Employer or any other party in relation to this case. I am qualified in occupational health medicine as defined below⁶. I have given due regard to any guidance issued by the Secretary of State for Communities and Local Government when completing this certificate. **IRMP's Signature** IRMP's Name (print) **Date** 1 IRMP's Official Stamp

 ^{&#}x27;Permanently incapable' means the person will, more likely than not, be incapable of discharging the duties of their former employment with the employer because of ill health or infirmity of mind or body until, at the earliest, their normal pension age.
 'Gainful employment' means paid employment of not less than 30 hours in each week for a period of not less than 12 months. It does not have to be a comparable employment in terms of pay and conditions with those of the member's former LGPS employment.

^{3. &#}x27;Normal Pension Age' means the member's individual State Pension Age at the time the employment is to be terminated, but with a minimum of age 65. State pension age was equalised to age 65 in November 2018 and will continue to increase from December 2018 onwards. To determine an individual's State pension age, please go to www.pensionsadvisoryservice.org.uk/state-pensions/know-your-state-pension-age

⁴ 'Permanently incapable' means the member will, more likely than not, be incapable until, at the earliest, age 65.

⁵ Life expectancy of less than one year may only be certified by a fully registered person as defined in the Medical Act 1983.

⁶ I hold a diploma in occupational health medicine (D Occ Med);

or an equivalent qualification issued by a competent authority in an EAA State (as defined in S55(1) Medical Act 1983); or I am an Associate, a Member or a Fellow of the Faculty of Occupational Medicine; or of an equivalent institution in an EEA State.