



AXA UK GROUP PENSION SCHEME PAYSMART WAIVER FORM

Please return the completed form to your local Payroll department

Please use capital letters

Surname

Forenames

Title

Employee Number

National Insurance Number

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Your declaration

I have read and understand the explanation of the *PaySmart* process included in the Member's Guide.

I confirm that I do not wish to pay my pension contributions via *PaySmart* salary reduction and instead wish for my pension contributions to be deducted directly from my salary and paid as employee contributions.

I understand that I will not benefit from paying lower National Insurance contributions as a result of this decision.

(Note: If you are already participating in PaySmart, you must complete 12 months as a participating member before you can opt-out. Waiver forms submitted before then will not take effect until the end of the 12 month period.)

Signature

Date

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