

Change of Name

Your details

New Name	
Old Name	
National Insurance Number	
Contact Address	
Contact Telephone Number	
Contact Email Address	

Please Note that pension services will require verification of name change. Please forward a **copy** of your Marriage certificate or deed poll registration etc along with this form.

Signed	Date
---------------	-------------

Please print and return to:

**Essex Pension Fund
Pension Services
PO Box 11
County Hall
Chelmsford, Essex
CM1 1LX**