## PART C

# APPENDICES TO RULES FOR OCCUPATIONAL RETIREMENT SCHEMES

APPENDIX 7
(SLC 2.5.1 and 6.4.1(c) of Part B of the Pension Rules for Occupational Retirement Schemes)
Schedule of Payments
Name of Retirement Scheme:

#### Introduction

This Schedule has been prepared in accordance with article 18 of the Retirement Pensions Act, 2011. It comes into effect on \_\_\_\_\_ and covers the period to [last date in contribution rate table, which may be up to 10 years or the average working life of contributing individuals if less]. The Retirement Scheme Administrator is responsible for preparing a revised Schedule no later than [Insert date].

#### Contributors

[Please delete as appropriate]

- This Schedule covers contributions to the Scheme from the following Contributors: [Please insert list of Contributors]
- This Schedule covers contributions to the Scheme from all Contributors who participate in the Scheme from time to time.

### Contribution rates – Employers

The Employers will contribute to the Scheme at the following rates:

Туре	Period	Amount
Normal	The [insert period – up to 10 years] year period commencing from the date of certification of this Schedule by the actuary.	% of pensionable salary.
Expenses	The [insert period – up to 10 years] year period commencing with the date of certification of this Schedule by the actuary.	% of pensionable salary. or The Contributors will pay additional amounts to cover the costs of meeting Scheme expenses.
Additional	[relevant period(s)]	% / Amount: each month

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	etirement Scheme Administrator receives these ys] of the end of the calendar month to which the
Contributions – by Individuals	
Contributing Individuals who are Members follows:	of the Scheme will contribute to the Scheme as
Period	Amount
The [insert period – up to 10 years] year period commencing with the date of certification of this Schedule by the actuary.	·
The Member contribution rates given above contributions.	do not include Members' additional voluntary
• •	ne Administrator receives the payments within which they were deducted from individuals' als.
Signed on behalf of the Employers:	
Signature:	
Name:	
Capacity:	
Date:	
Signed on behalf of the Retirement Schem	ne Administrator:
Signature:	
Name:	
Capacity:	

Date: