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| **Resource Toolkit** | Single Scheme Administration Project (Phase 1)  **Death-in-Service Resources** |
| **Resource Name** | Template Letter – Cover Letter with Child Pension Benefit Statement |
| **Resource Reference** | SPS.DTH.DIS.TL.11 (Phase 1) |
| **Description** | This letter may be used to send the Benefit Statement in respect of an eligible child following the death-in-service of a Single Scheme member |
| **Version** | V1.0 |

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| **PLEASE NOTE:** Administratorsmay accesslegislation, Circulars or Letters to Personnel Officers noted in this Procedure by accessing the Circulars & Legislation Section of the Single Scheme Website at [www.singlepensionscheme.gov.ie/circulars](http://www.singlepensionscheme.gov.ie/circulars) |

**Strictly Private & Confidential**

<<Title>> <<Forename>> <<Surname>>

<<Home Address 1>>

<<Home Address 2>>

<<Home Address 3 >>

dd/mm/yyyy

**Re: Single Public Service Pension Scheme**

**Member: <<Member name>> (Deceased)**

**Entitlement to a Child Pension Benefit - <<Insert Name of Eligible Child>>**

Dear <<Title>> <<Surname>>

I am writing to confirm that the above named child is eligible to receive a Child Pension benefit under the Single Public Service Pension Scheme.

**Child Pension Benefit Statement**

I have enclosed a Child Pension Benefit Statement that confirms the annual gross Child Pension amount payable.

It should be read along with the enclosed Death-in-Service Benefits Information Note. If you feel that any of the information is incorrect on your Statement, you should make prompt contact with me as this may affect the benefit amount payable.

**Documentation required to set-up your pension**

There being no outstanding claims requirements, I confirm that I am now in a position to issue final documentation to you.

I have enclosed the following documents that you should complete and return to me at your earliest convenience:

* Child Pension Benefit Acknowledgement Form
* Bank Payment Mandate Form – please note that where a child is under 18 years of age and in the care of a Parent/Step-Parent/Legal Guardian, payment of the Child Pension Benefit will be made to the Parent/Step-Parent/Legal Guardian who should complete the Bank Payment Mandate Form.

On receipt of completed documentation, I will be in a position to set-up the pension and confirm the first payment date.

If you have any queries, please contact me by telephone on <<insert Pension Administrator’s Phone Number>> or by e-mail <<insert Pensions Administrator’s Email Address>>.

Yours sincerely

**<<Pension Administrator’s Name>>**

**<<Pension Administrator’s Department**