



## Moray Council Salary Sacrifice Agreement Shared Cost AVC Scheme

This form confirms that you are entering into a salary sacrifice agreement. By completing this form you are confirming your participation in the salary sacrifice arrangements under the revised terms and conditions of employment. If you wish to join the Council's Shared Cost AVC Scheme (SCAVC) you should apply to join the scheme through the Prudential web site, complete this form and sign the declaration.

Employer	Moray Council
Employee Name	
Payroll Number	
Date of Birth	
Job Title	
National Insurance Number	
Amount of Salary Sacrifice Contribution to Shared Cost AVC (excluding £1)	Fixed amount £
Amount of non-Shared Cost AVC	£1

### Terms and Conditions

- 1 This Agreement is an amendment to your Contract of Employment, referring in particular to your monthly salary, which will be reduced by the financial value of the Shared Cost AVC.
- 2 You are unable to enter into the Shared Cost AVC Scheme if your chosen reduction in salary would reduce your salary below the National Minimum Wage.
- 3 You agree that, in exchange for the additional employer contribution being paid by Moray Council (your Shared Cost AVC amount) the Council will reduce your salary by the value of the Shared Cost AVC.
- 4 The benefit value of the Shared Cost AVC Contribution will be regarded as a pensionable payment for the purposes of the Local Government Pension Scheme (Benefit and Contribution) Regulations 2008. This means that LGPS pension contributions and benefits will be based on your salary before the Shared Cost AVC contribution is made.
- 5 The Agreement will commence on the date that you sign this form; however Payroll will confirm the payment date that your contributions will start.

### Termination

- 6 The Agreement will run for a minimum period of 12 months and will continue to run indefinitely unless you request that the Agreement is to be terminated. The earliest date at which you can ask to terminate the Agreement is 12 months after you entered into this Agreement. Thereafter, you can only request to terminate the Agreement on each annual anniversary date or as a result of a Lifestyle Change (see clause 7). In order to terminate the Agreement, you must complete the Terminate Agreement Form and send it to Payroll, giving at least one month's notice.

- 7 If at any date you have a change in your personal circumstances, which is deemed to be a “Lifestyle Change”, the Agreement may be terminated, examples of Lifestyle Changes can be found in the Shared Cost AVC Scheme Guidance. If your application to terminate meets the conditions of the scheme it will be processed from the first available payroll period.
- 8 In the event that this Agreement is terminated at your request, you would be unable to re-join the scheme for a minimum period of 3 months.

### **Changes**

- 9 Your Salary Sacrifice Shared Cost AVC amount can be changed by you at any time by completing and sending the Amend Monthly Contribution form to Payroll.

### **Agreement**

- 10 You may not enter into this Agreement on behalf of someone else.
- 11 You agree that it is your responsibility to determine and understand the effect on your financial position by entering into this Agreement in respect of Council or State Benefits.
- 12 You agree that it is your responsibility to determine and understand the effect on your tax liability of entering into this agreement in relation to the Annual Allowance and the Lifetime Allowance, as defined periodically by HMRC. Further information on Annual Allowances and Lifetime Allowance can be found in the Frequently Asked Questions.
- 13 You agree to pay £1 per pay into the AVC arrangement by deduction from your salary as your contribution to the Shared Cost AVC arrangement. You are aware that this shared cost contribution cannot be made via salary sacrifice and is in addition to the amount paid by Moray Council under the Shared Cost AVC arrangement and by which your Salary is reduced under this Agreement.
- 14 You agree to have read and understood the accompanying guidance and FAQs.

### **Declaration**

I agree to the variation in terms and conditions of my employment and the reduction in my salary, as described in the Terms and Conditions above and I agree to abide by the conditions of the Shared Cost AVC arrangement. I hereby authorise Moray Council to reduce my salary by amount stated overleaf on the date confirmed to me by Payroll for a minimum period of 12 months in return for an equivalent employer contribution into my AVC fund.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

This completed form should be scanned and sent to [payroll@moray.gov.uk](mailto:payroll@moray.gov.uk) or printed and posted to:-

Payments Section (Payroll)  
Moray Council  
High Street  
Elgin  
IV30 1BX