

**CHANGE OF ADDRESS FORM**

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Please use this form to notify us of a change to your home address and/or contact details.

**FULL NAME****NATIONAL INSURANCE NUMBER****OLD ADDRESS**

	<b>POSTCODE</b>	

**CURRENT ADDRESS**

	<b>POSTCODE</b>	

**EMAIL ADDRESS****TELEPHONE NUMBER****MOBILE NUMBER****SIGNATURE****DATE**

Post this form to: Lambeth Pensions, PO Box 80771, London, SW2 9QQ

Or email it to: [pensions@lambeth.gov.uk](mailto:pensions@lambeth.gov.uk)