*Please complete both sections for both you and your spouse as far as possible.*

Form completed by:…………………………………………………………………

(Please print name)

INFORMATION FORM

|  |
| --- |
| **PARTY A’S DETAILS** |
| Title & full name |  |
| National Insurance No. |  | Date of birth |  |
| Pension Scheme Reference Nos |  |
| Solicitor’s Name  |  |
| Solicitor’s Firm |  |
| Solicitor’s Address |  |
|  |

|  |
| --- |
| **PARTY B’S DETAILS** |
| Title & full name |  |
| National Insurance No. |  | Date of birth |  |
| Pension Scheme Reference Nos |  |
| Solicitor’s Name  |  |
| Solicitor’s Firm |  |
| Solicitor’s Address |  |
|  |

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| --- |
| **DIVORCE DETAILS** |
| Date of Cohabitation |  | Date of Separation |  |
| Date of Marriage |  |  |  |
| Dates of Divorce Actions | Petition | Nisi | Absolute |
| Is this a Joint Instruction?  | Yes |  | No |  | If No, is instruction from Party A or Party B? |  |
|  |  |
|  |

|  |
| --- |
| CHECK LIST***Please enclose any information available regarding either party’s pensions that you may have.*** |
| Please answer Yes or No to the following questions. If the answer to any is Yes, please give details below. |
| 1. Is either party currently in receipt of a pension? If Yes, which party and from which pension provider?
 |
|  |
| 1. Does either party have an existing Attachment Order or Pension Sharing Order against them?

If Yes, which party and against which pension provider? |
|  |
| 1. Is either party a higher rate taxpayer?
 |  |
| 1. Has either party ever been bankrupt?
 |  |
| 1. Is either party in serious ill-health?
 |  |

ANY OTHER INFORMATION:–

PLEASE ADD FURTHER COMMENTS ON A SEPARATE PIECE OF PAPER IF REQUIRED