



**ORDER FORM A**

(To be used for all Providers, **except** Aon Solutions UK Limited)

**National LGPS Framework for Pensions Administration Operational Support  
Services**

**Reference number – NCCT42210**

FROM

Authority	NHS Business Services Authority
Service Address	Hesketh House, Broadway, Fleetwood FY7 8LG
Invoice Address	Stella House, Goldcrest Way, Newcastle upon Tyne, Tyne and Wear, NE15 8NY
Contact Ref:	[REDACTED] [REDACTED]
Order Number	To be quoted on all correspondence relating to this Order: W167611
Order Date	17 January 2025

TO

Provider:	EQ Paymaster (Paymaster (1836) Limited)
For the attention of:	[REDACTED]
E-mail	[REDACTED]
Telephone number	[REDACTED]
Address	27 Kings Road, Reading Berkshire RG1 3AR

## 1. SERVICES REQUIREMENTS

### (1.1) Services and Deliverables Required:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

### (1.2) Commencement Date: *14 January 2025*

(1.3) Price Payable by Customer (per person, per day, exclusive of VAT)

[REDACTED]

(1.4) Completion Date:

*31 March 2025*

## 2 FURTHER COMPETITION ORDER - ADDITIONAL REQUIREMENTS

(2.1) Any variations to Call-Off Terms and Conditions, including additions:

[REDACTED]

## 3. PERFORMANCE OF THE SERVICES [AND DELIVERABLES]

(3.1) Key Personnel of the Provider to be involved in the Services and Deliverables:

*N/A*

(3.2) Performance and Quality Standards

*To be added as an appendix once the QA framework has been agreed*

(3.3) Location(s) at which the Services are to be provided:

*Fully remote basis with some initial F2F meetings in Fleetwood as required*

(3.4) Contract Monitoring Arrangements

*Weekly check in calls.*

#### 4. CONFIDENTIAL INFORMATION

(4.1) The following information shall be deemed Commercially Sensitive Information or Confidential Information:-

Data relating to personal information in relation to members of the NHS Pension Scheme

#### 5. DATA PROTECTION

(5.1) The Customer agrees to the Provider appointing the following sub-processors:

[REDACTED]

(5.2) Any agreed variation pursuant to Appendix 1 Clause 12 (Joint Controllers).  
N/A

#### 6. LIABILITY CAPS

6.1) Any agreed variations to the liability cap provided for under clause 7.1.2 of the Call-off Terms and Conditions: N/A

BY SIGNING AND RETURNING THIS ORDER FORM THE PROVIDER AGREES to enter a legally binding contract with the Customer to provide to the Customer the Services specified in this Order Form (together with, where completed and applicable, the mini-competition order (additional requirements) set out in section 2 of this Order Form) incorporating the rights and obligations in the Call-Off Terms and Conditions set out in the Framework Agreement entered into by the Provider and the Authority on 22<sup>nd</sup> April 2022.

For and on behalf of the Provider:-

Name and Title	<div></div>
Signature	<div></div>
Date	<div></div>

For and on behalf of the Customer:-

Name and Title	<div></div>
Signature	<div></div>
Date	<div></div>

## Appendix 1



Travel Subsistence and Expenses Guidance - Dec-22 v2.1.pdf