

Ironworkers Local 97 Pension Plan

Application For Transfer Of Funds

Name: _____ Telephone: _____

Social Insurance Number: _____ Date of Birth (**PLEASE PROVIDE PROOF**): _____

Spouse date of Birth (**PLEASE PROVIDE PROOF**): _____

Address:

_____ Postal Code: _____

Date Last Worked: _____

*** ELIGIBILITY FOR TRANSFER:** You must be a vested plan member and either complete two consecutive plan years with less than 200 hours worked in EACH year; OR have worked less than 350 hours in total during the previous two plan years.

I HEREBY ELECT TO HAVE A TRANSFER OF THE COMMUTED VALUE OF MY ACCRUED PENSION BENEFIT MADE IN THE FOLLOWING MANNER:

- A. *Transfer to Another Registered Pension Plan* _____
- C. *Transfer to a Locked-In RRSP* _____
- D. *Transfer to a Life Income Fund (LIF)* _____
- E. *Transfer to the DAT/DCS Group RRSP (locked-in)* _____

All funds will be locked in and must be used to provide you with a monthly pension upon retirement.

*A locked-in RRSP is an RRSP that cannot be deregistered. This money can only be used to provide you with a monthly pension at retirement.

I HEREBY AUTHORIZE THE PLAN TO MAKE THE TRANSFER IN FULL SATISFACTION OF ALL ENTITLEMENT TO BENEFITS FROM THE PLAN.

Dated

Member's Signature

To be completed by the Union:

We hereby confirm that the above member is entitled to the above transfer.

Authorized Signature

Date