



Carpenters Local 18 Pension Plan

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DUES TRUST FUND - RETIREMENT OPTIONS

For Members having in excess of 10 years payments in their Dues Trust Fund with Local 18.

If you commence receiving your pension but continue to work through Local 18, you will not be issued a DTF refund until you notify us that you are no longer working through Local 18.

MEMBER'S PERSONAL INFORMATION

Name: _____ SIN: _____

Date of Birth: _____ Date of Retirement: _____

Date Joined Local 18: _____

Month Last Worked After Retirement (if applicable): _____

MEMBER'S ELECTION

_____ Leave 10 years in my Dues Trust Fund and refund the balance to me.

_____ Leave 15 years in my Dues Trust Fund and refund the balance to me.

_____ Leave the full balance in my Dues Trust Fund for now.

If any of the above options are chosen, and you later choose to resign your membership with Local 18, you will receive a full refund of any balance in your Dues Trust Fund at that time.

_____ I do not wish to remain a member of Local 18 and request a full refund of my Dues Trust Fund as soon as possible.

All dues money in the fund will be applied to your monthly dues, and you will be notified by letter if/when you are required to begin making payments again. If there is an increase to monthly dues after this form is processed, your Dues Fund will be re-applied at the new rate, and you may have your Fund run out earlier than indicated at the time of retirement.

Signature of Member

Date

Signature of Witness

Name of Witness (Print)

Privacy Statement: I authorize the Carpenters Local 18 Pension Plan, their administrator Employee Benefit Plan Services Limited, and providers working with the Plan or administrator to collect, maintain, use and disclose my personal information that is necessary for the administration of the Plan. Personal information will be protected pursuant to the applicable legislation. The Plan may collect, maintain, use and disclose my personal information with relevant persons or organizations (employers, institutions, insurers, investigative agencies, legal counsel, other plans or unions, regulators, re-insurers, Plan administrators) in order to manage the Plan and entitlement to the benefits of the Plan, and may include financial related information. Questions related to the Privacy Statement should be directed to the Privacy Officer.