

VICTORIA MECHANICAL INDUSTRY PENSION PLAN - BENEFICIARY DESIGNATION

A. MEMBER LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL INSURANCE NO: _____

CONTACT PHONE NUMBER: _____ GENDER: Male Female

B. MARITAL STATUS DECLARATION - Your spouse has important rights under the Pension Plan. The Pension Benefits Standards Act defines "spouse" to mean, in relation to you, the person who
a) was married to you, and has not lived separate and apart from you for a continuous period longer than 2 years immediately preceding the "relevant time" or
b) was living with you in a marriage like relationship, for a period of at least 2 years immediately before the "relevant time"
Relevant time : means the date of your retirement or death as is appropriate

I hereby certify that I have read the above definitions and that as of the date of this declaration, I am

Single Married Common law Separated Divorced Widowed

C. SPOUSAL INFORMATION – Only Complete if You are Married or in a Common Law Relationship

SPOUSES LAST NAME	FIRST NAME	GENDER	DATE OF BIRTH	DATE OF MARRIAGE OR CO-HAB

Note: If your spousal relationship ends, your former spouse may still have family law based entitlements to a portion of your pension. If your marital status changes in the future, please contact your Plan Administrator to complete a new form

D. BENEFICIARY DESIGNATION - This designation applies if there is a benefit payable from the Plan on your death. Any right a spouse has (including a former spouse) will have priority over the designated beneficiary but you should still designate a beneficiary to receive any part of a death benefit that is not paid to a spouse. If there is no spouse and you fail to designate a beneficiary the death benefit will be paid to your estate.

I designate the following individual(s) as my beneficiary(ies) and revoke any prior designations. If anyone listed below dies before me then their percentage of entitlement will be divided equally among the surviving beneficiaries.

LAST NAME	FIRST NAME	RELATIONSHIP TO YOU	PERCENT OF ENTITLEMENT
			%
			%

E. APPOINTMENT OF TRUSTEE If any of your beneficiaries are under the age of 19 you must appoint a Trustee, if you fail to name a Trustee, the Pension Plan will pay the benefits to the Public Guardian and Trustees Office. Such payment will discharge the Victoria Mechanical Industry Pension Plan's obligation.

TRUSTEE LAST NAME	FIRST NAME	RELATIONSHIP TO YOU	CONTACT PHONE NO.

DECLARATION:

I, the undersigned hereby:

- a. certify that the information on this form is correct and understand the Plan will rely on the information provided
- b. agree that the plan may communicate with me electronically by email and that a scanned copy of this form is as valid as a physical version of this form.
- c. consent to the collection, use, and disclosure of my personal information by the Board to administer the Plan
- d. agree to be bound by all the terms and conditions of the plan
- e. agree to promptly update the Plan Administrator of changes in my marital status
- f. agree that I am liable for any benefit paid out incorrectly if I fail to update the Plan Administrator on my marital status
- g. understand that my entitlement depends entirely on the terms of the Plan.

Signature of Member: _____

Date: _____

PLEASE SUBMIT COMPLETED FORM TO PLAN ADMINISTRATOR