Enclosed you will find the following paperwork that must be completed:

- 1. Pension Application
- 2. Joint & Survivor Election form
- 3. Joint & Survivor Rejection form

If you elect any benefit other than the 50% Joint & Survivor benefit, the Rejection form must be completed and signed in front of a Notary

4. Retirement Declaration

You must include copies of your Marriage Certificate and both Birth Certificates when you return the application and other documents. The application and all required documentation must be received at least two full months prior to your retirement starting date, and must be reviewed and approved by the Board of Trustees.

Send to: Birmingham Plumbers & Steamfitters Local 91

Pension Fund

3625 9th Avenue, North Birmingham, AL 35222

BIRMINGHAM PLUMBERS AND STEAMFITTERS LOCAL NO. 91 PENSION FUND

PENSION APPLICATION FORM

<u>Please read application carefully and print or type except where signature is required</u>
Application must be submitted at least 2 full months before retirement date:

PERSONAL DATA:	
1. Name	2. S.S.#
3. Address	
4. Phone #	5. Date of Birth
6. Married (wife's date	of birth)SingleDivorcedWidowed
(ATTACH COPIES OF BOTH	BIRTH CERTIFICATES AND MARRIAGE CERTIFICATE)
7. Intended Retirement date	e
8. TYPE OF PENSION:	FOR EMPLOYEE WHO:
Normal Pension	reach the age of 65 and have at least 5 years of credit
Late Retirement Pension	are over the age of 65 and have at least 5 years of credit
Unreduced Early Pension	<u>ACTIVE</u> Participant who has reached the age of 60, is fully Vested and has at least 30 years of credit
Reduced Early Pension	<u>ACTIVE</u> Participant who has reached the age of 55, but not 60 and is fully Vested.
Vested Deferred Pension	employment before being eligible to receive a pension and has at least (1) 5 years of Vesting Service on or after January 1, 1998 (2) 10 years of Vesting Credit before December 31, 1997(3) If Inactive vested participant on January 1, 1986, application will be processed according to the "Plan" in effective on January 1, 1986.
Disability Pension	recognized by your entitlement to Social Security Disability benefits, you are vested with at least 5 years of Credit, are under the age of 65 and became disabled before the 1 st day of the 13 th month after you left covered employment

9. FORM OF PENSION: I WOULD LIKE TO RECEIVE BY PE	ENSION IN THE FORM OF A:
(A) 50% Joint & Survivor benefits	
(B) Single Life	
(C) 75% Contingent Annuitant Option	
(D) 100% Contingent annuitant Option	
Completed Election form enclosed Rejection form enclosed ************************************	
10. MILITARY SERVICE:	
	S. Armed Forces ? Yes No From:To:
	st? YesNo YearYear
11. DISABILITY PENSION:	
to be prevented from engaging in emplo Social Security Administration.	sion and are permanently & totally disabled so as byment, please enclose "Notice of Award" from
I hereby apply; for a pension from the I Union No. 91 Pension Fund. The above and belief. I understand that a false sta	Birmingham Plumbers and Steamfitters Local statements are true to the best of my knowledge tement may disqualify me from pension benefits ht to recover any payments made to me because of a
Signature of Applicant:	

Birmingham P&SF LOCAL UNION No. 91 PENSION FUND JOINT AND SURVIVOR ELECTION FORM

Under the Pension Plan, your benefit is paid as a Joint & Survivor Pension if you are married when you retire, (unless you & your spouse reject that form of payment). The Joint & Survivor Pension provides for an actuarial reduction in the monthly pension for the life of the pensioner. In the event of the pensioner's death, the spouse receives a lifetime pension equal to 50% of the amount that was being paid when the pensioner was alive.

If the Joint & Survivor pension is rejected, a higher amount is paid to the pensioner while living but all benefits cease at the time of his death. Therefore there is no continuation of benefits to his spouse.

Select one:	A.		receive my pe ivor Pension.	nsion b	enefit in the form of a	
Spouse's Name	:		Date of birth		Social Security Number	
	В	Please inform me of the amounts that would be due me and my spouse. I understand that after I have received this information, I may make another selection.				
Contingent Annuita single you must con	ant Pension aplete the to and your notarized.	payable at 50%, op part of the RE.	75% or 100% IECTION for	of you m and	Survivor Pension, you may eler single life benefits. If you are your signature must be notarize REJECTION form and your	e zed.
	C.	I wish to rece	eive a Single L	ife Pen	sion.	
	D	my pension b Pension. Ple my beneficia	enefit in the fase inform me	form of e of the and tha	nsion, I want to receive a Contingent Annuitant amounts that would be due t when I receive this election.	
Beneficiary's n	ame		Date of birth		Social Security Number	_
Address			City	State	Zip	
Relationship		Phone number				
Member Signature				Date		

If

Birmingham P&SF LOCAL UNION No. 91 PENSION FUND JOINT AND SURVIVOR <u>REJECTION</u> FORM

EMPLOYEE'S STATEMENT

<u> </u>	do not wish to receive my p	pension benefits in the form of
	rstand that rejecting this form of pension an after my death, unless I elect another ne Plan.	
Check one: I hereby swear	that I am not legally married at this tin	ne.
I hereby swear	that I am unable to locate my spouse.	
I hereby swear is my current l	that the person co-signing this document egal spouse.	nt below
Employee's Signature	Social Security Number	Date
State of	County of	
On this day of2	hoforo mo como	
· ·	ibed in and who has acknowledged to mo	e that he/she executed the
	My commission expires:	
Notary Public	Date	(SEAL)
described above. I hereby consent tunderstand that as a result, I will no except as may otherwise be provided designated someone other than myst	SPOUSE'S STATEMENT swear that I am the legal sylonger of the Joint & Soft be paid a pension from the Pension Plant and the provisions of the Plant and the state of the provision of the Plant and the pension prior to my spouse's despaid to my spouse while he or she is living tection.	urvivor Pension. I an after my spouse's death, l only if my spouse has not eath. I further recognize that
Spouse's Signature	Social Security Number	Date
State of	County of	
On this day of 2	2 before me came	
	bed in and who has acknowledged to mo	
	My commission expires:	
Notary Public	Date	
-		(SEAL)

BIRMINGHAM P&SF LOCAL UNION NO. 91 PENSION FUND

RETIREMENT DECLARATION

Participants name:	S.S.#
1. DISQUALIFING EMPLOYMENT BEFO	ORE NORMAL RETIREMENT (AGE 65)
-	n P&SF Local Union No. 91 Pension Fund, I declare that I f the Plan and that I shall cease being employed or engaged is defined below:
began; Industry covered by the P	ne Plan when the Participant's payments lan means the plumbing, heating, pipefitting d any other industry in which employees d when their pension began.
(b) in the same trade or craft <u>includin</u> the Participant's pension payment	g supervisory work covered by the Plan when ts began; and
granted to the Birmingham Plumb by the United Association of Journ	red by the Plan as when such benefits a covered by the Plan is the jurisdiction pers & Steamfitters Local Union No. 91 neymen and Apprentices of the Plumbing ited States and Canada, AFL-CIO
2. DISQUALIFING EMPLOYMENT AFTE	ER NORMAL RETIREMENT (AGE 65)
including supervisory work for more than 3	etirement age, is defined as employment or self-employment 9 hours per month in (a), (b) and (c) above. ***********************************
I understand that if I perform work in violati Retirement Declaration:	on of the Rules and Regulations of the Pension Plan and this
(1) I must notify the Board of Trustees <u>in</u> (whether or not it is 39 hours or more	n writing within 15 days after starting work e a month.
(2) My pension payments will stop for the Employment.	e months in which I work in Disqualifying
Trustees (within 15 days) that I have	ent age (65) and I fail to notify the Board of returned to work, my pension payments may be suspended nths following the month in which I cease working in
Participants Signature:	