

Employee Personal Information

First Name Last Name Last 4 SIN Date of Birth Marital Status

Address 1 _____ City _____
Address 2 _____ Prov _____ Postal Code _____

Personal Email Address _____

Phone Number _____ Phone Number (Alternate) _____

(Please refer to reverse for more information)

Employer Use

Participating Employer: _____

Date of Termination: _____

Is the reason for retirement the result of an approved Medical Disability Pension? _____

Total current calendar year pensionable earnings to date of termination: _____

Total current calendar year contributions to date of termination: _____

Does the employee have an outstanding Purchase of Service contract or GMPP Transfer request submitted to Provident10? _____

Did the employee have retroactive earnings in the last six years? _____

I confirm, and I have verified with the employee, that the above information is complete, accurate and up-to-date.

Date Employer Representative Name Employer Phone Number

(Please submit this form electronically to pensions@provident10.com using Kiteworks or another secure, encrypted method.)

The personal information collected or provided will only be used for purposes relating to the operation of the relevant pension programs and for statistical reports. All information will be kept confidential and will not be disclosed to third parties without your consent unless required or authorized by law. If you have any questions or concerns, please contact Provident¹⁰.

When should this form be used?

Please complete the Retirement Application for an employee who is eligible to retire and receive an immediate unreduced pension or has been approved for a medical disability pension. Please refer to immediate unreduced pension eligibility criteria below when completing this form.

Required Documentation:

In order for a Retirement Application to be considered complete and approved for processing, the following documents MUST accompany this form:

- i) Calculation of Pension Entitlement Form
- ii) A copy of Member's Birth Certificate (if certificate is not available, a copy of valid Passport or valid Drivers License are acceptable)
- iii) Direct Deposit Form, with VOID cheque or Bank issued Personal Bank Account Information Form

Optional Documentation:

- i) TD1 Forms (recommended) - if not submitted, deductions will be based on CRA's Basic Exemptions

Notes:

- 1. If required documents are not submitted with Retirement Application, the application is considered incomplete. If incomplete application is received, employer will be contacted, and member notified.
- 2. If a Retirement Application is received late, member will be notified and application will be processed for the next pension pay period date, retroactive to the effective date of the pension. Please note that a new pensioner is only placed on pension for the 15th pension pay period date in each month.
- 3. The processing of a Retirement Application may be delayed due to an outstanding Purchase of Service request, outstanding GMPP transfer request, contributions or contract payments owing to the plan by the plan member and/or employer, delay in receiving confirmation of information, etc.
- 4. Pensions benefits are paid semi-monthly, i.e., 24 payments per year, payable on the 15th and the last day of each month.

Immediate Unreduced Pension Eligibility Criteria:

- i) Age 55, with a minimum of 30 years of credited service in the PSPP, provided the 30 years was credited prior to January 1, 2020
- ii) Age 58, with a minimum of 30 years of credited service in the PSPP
- iii) Age 60, with a minimum 5 years of credited service, provided member was 60 and had a minimum of 5 years of service prior to January 1, 2020
- iv) Age 60, with a minimum of 10 years of credited service in the PSPP
- v) Age 65, with a minimum of 5 years of credited service in the PSPP