

## INSTRUCTIONS AND HIGHLIGHTS FOR COMPLETING PENSION APPLICATION

### WHAT DO I NEED TO DO TO APPLY FOR MY PENSION?

- Please read this application carefully. Be sure to answer all questions. Attach additional sheets if you need more space.
- Look through your personal records for the best proof of age according to the instructions below and include it with your application.
- Be sure to date and sign you application on page 3.
- Mail your completed application, proof of age and any other supporting material to the Fund Office.
- **If you have been divorced, you must submit a copy of your Divorce Decree(s) and Marital Property Settlement Agreement(s) to the Fund Office. This information is needed by the Fund to determine if your former spouse is entitled to a portion of your pension. Your benefits cannot commence until the Fund Office receives this information. You must submit this information regardless of whether the marriage and/or divorce was prior to or subsequent to your employment in the baking industry.**
- Please indicate if you are applying for a disability pension on page 2. If so, the Fund will send you additional forms and as Authorization to Release Medical Information for you to sign and return to the Fund, so that the Fund can obtain information from you doctors.

### WHAT HAPPENS NEXT?

- After you return this initial application, the Fund will determine whether you are eligible to receive benefits from the Fund and, if so, the amount of benefits you are entitled to receive.
- The Fund will send you an analysis describing the various benefit options available from the Fund, and the amount you are entitled to receive under each option. These options include: the Regular Pension Option, the 50% Husband and Wife Option, the 75% or 100% Husband and Wife Option, the 10-Year Certain Option, and the Social Security Option (if applicable).
- You must indicate on the analysis you receive from the Fund Office the type of pension you wish to receive and return it to the Fund Office signed and dated. Your pension benefits cannot begin until you return this form.
- Some options (specifically, Regular Option, the Ten-Year Certain Option and the Social Security Option) require that you (and your spouse, if you are married) sign the Husband and Wife rejection form and have it notarized. **This form must be signed no more that 90 days prior to your pension effective date. If the form is filed more than 90 days prior to your pension effective date, the Fund will send you another Rejection Form to complete and return within the 90-day period.**

## WHAT SHOULD I SUBMIT FOR PROOF OF AGE?

**You may submit copies of any one of the following documents as proof of age. Additional proof of age may be required if the document you submit is not convincing proof. If you submit an original document as proof of age, it will be returned to you immediately.**

### COPIES OF DOCUMENTS ARE ACCEPTABLE

- A Birth Certificate
- A Baptismal Certificate or a statement as to the date shown by a church record, certified by the custodian of such record
- Notification of Registration of Birth in a public registry of vital statistics
- Certification of record of age by the U.S. Census Bureau
- Hospital Birth Record, certified by the custodian of such record
- A Medicare Card or Certificate of Social Security Insurance Award, if age or birth date is shown
- A foreign church or government record
- A signed statement by the Physician or midwife who was in attendance at birth, as to the date of birth shown on their records
- Naturalization Record
- Immigration Papers

**If you do not have one of the above, then submit at least TWO of the items listed below:**

- Military Record
- Passport
- School Record, certified by the custodian of such record
- Vaccination Record, certified by the custodian of such record
- An insurance policy which shows the age or date of birth
- Other evidence such as notarized signed statements from persons who have knowledge of the date of birth.

# BAKERY AND CONFECTIONERY UNION AND INDUSTRY INTERNATIONAL PENSION FUND

10401 Connecticut Avenue, Kensington, MD 20895-3960 (301) 468-3742

## PENSION APPLICATION

**Last Day Worked:** Please give the last day you plan to work. \_\_\_\_\_  
 Month/Day/Year

**Effective Date:** Please give the date you want your pension to begin. All pension benefits are payable on the first of the month. Note: You cannot work in the month you want pension benefits to begin and all vacation and severance pay has to be used before pension benefits can begin (unless) you attain age 65 in which case you would begin to receive your pension benefits even if you continue to work or have not received all of your vacation and severance pay. \_\_\_\_\_  
 Month/Year

Social Security Number: (Member)	Pension Number:
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**1. PERSONAL DATA:** Please print or type

<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS	Last Name	First	Middle	Other Last Name(s)
Address	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married		Date of Birth Month / Day / Year	
City, State, Zip	Place of Birth		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Telephone Number ( ) Area Code	Year started in industry	Local Union No.	Mother's maiden name	
E-mail Address				
Name of Spouse	Social Security Number (Spouse)		Date of Birth Month / Day / Year	

Have you been divorced? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is ex-spouse entitled to portion of your Pension? <input type="checkbox"/> Yes <input type="checkbox"/> No	Submit Copy of Divorce Decree and Marital Property Settlement Agreement
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**LIST ALL PREVIOUS SPOUSES**

Name	Date Married	Date Marriage Ended	Reason (Divorce, Death, Etc.)
	Month/Year	Month/Year	
	Month/Year	Month/Year	
	Month/Year	Month/Year	
	Month/Year	Month/Year	

**Note:** If divorced submit copy of all Divorce Decrees and Marital Settlement Agreements

**II. EMPLOYMENT HISTORY:**

List below the full name and address of all bakery and/or confectionery companies you have worked for including your last employer. Include all periods of self-employment in the Industry. List job classifications and employment dates. Indicate if your employers are still in business, and local union number.

				Employment Dates Month/Year
<b>Most recent employment first:</b> Company Name		Job Classification		From /
Address	Local Union Number	Union Contract <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Still In Business <input type="checkbox"/> Yes <input type="checkbox"/> No	To /
Company Name		Job Classification		From /
Address	Local Union Number	Union Contract <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Still In Business <input type="checkbox"/> Yes <input type="checkbox"/> No	To /
Company Name		Job Classification		From /
Address	Local Union Number	Union Contract <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Still In Business <input type="checkbox"/> Yes <input type="checkbox"/> No	To /
Company Name		Job Classification		From /
Address	Local Union Number	Union Contract <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Still In Business <input type="checkbox"/> Yes <input type="checkbox"/> No	To /

**III. ADDITIONAL PENSION CREDIT:**

1. If you have served in the armed forces, you may be entitled to credit for this time. Fill in the dates below and enclose a photocopy of your discharge papers. **Credit will only be granted if you went directly from covered employment in the Bakery and Confectionery Industry into the service and returned directly to the Industry when you were discharged.**

\_\_\_\_\_ Date Entered

\_\_\_\_\_ Date Discharged

2. You may be entitled to additional pension credits for periods in which you were totally disabled.

Please submit documentation from your Doctor, Employer or other sources verifying the dates you were out due to sickness, disability, Worker's Compensation or any other medical leave.

**IV. I WANT TO APPLY FOR A DISABILITY PENSION.**

To receive a Disability Pension you must be permanently and totally disabled for six months, have at least 15 years of pension credit and have 504 hours of service in covered employment within 12 months preceding onset of disability. Effective January 1, 1999, if you earn more than one Hour of Service on or after that date and if you meet the other requirements for a Disability Pension, you can retire on a Disability Pension with ten (10) or more years of Pension Credit.

\_\_\_\_\_ I WANT TO APPLY FOR A DISABILITY PENSION  
(check)

**DISABILITY PENSION:**

If you are applying for a Disability Pension, give the information requested here:

1. Date you first became disabled \_\_\_\_\_

2. Last day worked \_\_\_\_\_

## V. IMPORTANT INFORMATION – WORKING AFTER RETIREMENT

Once you begin to receive (or are entitled to receive) your pension, your benefits will be suspended in accordance with Fund Rules if you work in employment or self-employment in the Bakery and Confectionery Industry more than 39 hours per month prior to age 65. If you are age 65 or over there is no limitation on what you may earn while receiving your pension. You may work outside the Bakery and Confectionery Industry at any age without affecting your pension.

**Please note: Employment in the Bakery and Confectionery Industry includes both union and non-union jobs, ownership of or partnership in a Bakery and Confectionery Business, and consulting in the industry.**

If you are under age 65 and return to employment in the Bakery and Confectionery Industry, you must notify the Fund in writing within twenty-one (21) days of such employment. In addition, if the Fund requests information from you regarding employment you may currently have or have had since you began receiving pension benefits, you must comply within sixty (60) days of the request.

If you have not given such written notice within the 21-day period or provided the requested information within the 60-day period as described above, your pension benefits shall be suspended for an additional 12 months over and above the suspension period. Please refer to Article VIII, Section 8.06 of the Rules and Regulations for rules governing Suspension of Benefits.

## VI. APPLICANT'S AFFIDAVIT

I hereby apply for a Pension from the Bakery and Confectionery Union and Industry International Pension Fund. The above statements are true to the best of my knowledge and belief. I understand that if I make a willfully false or fraudulent statement material to this application, or at any time in the application process, or furnish fraudulent information or proof material to this claim, benefits paid solely on account of my false statement will be denied, suspended or discontinued, and that the Trustees shall have the right to recover any payments made to me because of a false statement. Further, I understand that any false or fraudulent statement made during the application process may subject me to sanctions or prosecution under Federal and State law.

I also understand that, under certain circumstances, my pension benefit will be suspended and a one-year penalty will be assessed if I perform work in the Bakery and Confectionery Industry as explained in Section V above and in Section 8.06 of the Rules and Regulations.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant

If an (X) mark is used for signature, a witness must sign and include his or her Social Security Number.

\_\_\_\_\_

Signature of Witness

\_\_\_\_\_

Social Security Number of Witness

**PENSION BENEFICIARY FORM**

To the Board of Trustees:

I hereby designate as my beneficiary(ies) to receive any benefits that may be payable after my death under the Pension Plan or P-Plan, the following: Please note: "Benefits are paid for the pensioner's lifetime and, if the pensioner meets the requirements of Article VI, Section 6.04 and is married at the time of death, benefits continue at a 50% level for the spouse's lifetime. In some circumstances, particularly for unmarried participants, there may be some benefits (such as the 36-Month Guarantee under Article VIII, Section 8.02(b)(iii) and the Ten-Year Certain Pension under Article VII, Section 7.02) that remain payable after the participant's death. In case any of these other benefits apply to you, you should name a beneficiary (and, if you desire, a secondary beneficiary) to receive those benefits."

**BENEFICIARY:**

\_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Address

I hereby designate as my second beneficiary (CHECK ONE):

\_\_\_\_\_ (A) Jointly with the above beneficiary.

\_\_\_\_\_ (B) Only, if the above beneficiary is not alive at my death.

**BENEFICIARY (Second Choice):**

\_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date Signature of Pensioner

## APPLYING FOR PENSIONS

How Do I Apply for My Pension	<p><u>Submit Pension Application</u></p> <p>In order to receive your pension benefits you must submit a pension application. The earliest date pension benefits can be paid is the month following receipt of your pension application. Pension benefits are not retroactive to when you could have begun to receive them (this also applies to disability pensions).</p>
When are My Benefits Payable	<p>You will receive pension credit for all hours of vacation, pro rata vacation, holiday, and severance pay that your employer pays when you stop working. These hours are treated as if you are still working.</p> <p><b>If you are under age 65</b>, your pension will not begin in any month for which you work or are credited with 40 hours or more for vacation, pro rata vacation, severance, etc. If you receive 40 hours or more of credit in a month, your pension benefits will begin the following month.</p> <p><b>If you are 65 years of age or older</b> you can begin receiving your pension the month following your 65<sup>th</sup> birthday (provided you submit your Pension application) even if you continue to work in the industry. Your pension will be adjusted each April 1<sup>st</sup> to reflect any increases you became eligible to receive during the prior year.</p> <p><b><u>Disability Pension</u></b></p> <p>Benefits are payable commencing the <b>later of</b>: the seventh month after the onset of disability or the first month after the Fund receives your pension application.</p>
Information Needed:	<p><u>Proof of Age - Pensioner</u></p> <p>Birth Certificate or other proof of age accepted by the Fund (there is a list in the pension application).</p> <p><u>Proof of Age - Spouse</u></p> <p>Birth Certificate or other proof of age accepted by the Fund (there is a list in the pension application).</p> <p><u>Marriage Certificate</u></p> <p>Needed for a Husband and Wife Option.</p> <p><u>Divorce Decree(s)</u></p> <p>A signed copy of each divorce decree and marital settlement agreement is needed. If the divorce occurred before you began working in the Industry the Fund still requires you to submit a divorce decree. This is to verify you were actually divorced.</p>

What Happens after  
Application is Received

Eligibility is Determined

The Fund will make a determination whether you are eligible to receive a pension.

Benefit Calculated

If you are found eligible the Fund will calculate your pension based on information available to the Fund at that time.

Analysis Prepared

An analysis will be prepared showing the amount you may receive. The analysis will give the amount you may receive based on the various options available to you.

Information Sent

The analysis will be sent to you approximately 25 days prior to your pension effective date, along with beneficiary forms, tax forms and Husband and Wife Option rejection form (if applicable). The letter sent to you will also request any information that the Fund needs to process your pension.

What Must I Do

Complete and Return Information

Review the information sent to you. If the information is incorrect make the correction on the sheet. Indicate on the analysis which pension option you want to elect for your pension benefit, complete the forms sent to you and return the information to the Fund. Your pension benefits cannot be paid until this information is received.

Advise your Employer if you are under age 65

If you are under age 65 and are still working in the industry when you file your application, please advise your employer that you are retiring. The Fund will verify your Last Day Worked with your employer in order to establish your pension effective date. Until this is done, benefits cannot be paid to you. **This is not applicable to participants over 65. The reason is you can continue to work in the industry and receive pension benefits after you reach age 65.**

Working after  
Retirement

Age 65

If you are age 65 or over, you can continue to work in Industry Employment full time and receive your pension benefits.

Under Age 65

If you are under age 65 and receiving pension benefits, you can work in Industry Employment up to 39 hours per month and receive your pension benefits. You can work in any other industry as much as you want and receive pension benefits.