

U.A. Plumbers Local Union #68
PENSION PLAN
P.O. Box 8726
Houston, Texas 77249
713.869.2592 ♦ Fax: 713.862.4877 ♦ Toll Free: 800.833.2980

U.A. PLUMBERS L.U. 68 PENSION PLAN

Provisions of disbursement of Defined Contribution Fund:

1. Retirement age of 62
2. Disability either by authorization of Board of Trustees or Social Security.
3. Participants that have not worked in covered employment for 60 months or more may withdraw the funds that have accumulated in their Defined Contribution account.
4. Participants that have not worked in covered employment for 24 months or more with a balance \$2500 or less.

Eligible participants will be allowed to withdraw their monies upon receipt of properly completed application forms provided from the Fund Office. All payments made are subject to all applicable withholding rules established by the Internal Revenue Service.

Monies may be withdrawn on the 15th of each month. In order to receive your check in a timely manner all required forms and documentation **must** be received in the Fund office **15 working days** prior to this date.

Required Documents in addition to forms to be completed:

- Copies of your marriage license, if applicable.
- Copy of your full divorce decree (s) and original marriage date to divorced spouse.
- Your birth certificate,
- Your spouse's birth certificate, if applicable

No exceptions will be given. Birth certificates, marriage license, and divorce decrees must be accompanied with the Defined Contribution application, the notarized affidavit and the appropriate lump sum or rollover forms from the **DISTRIBUTION OPTIONS** documents.

If you are receiving a LUMP SUM PAYMENT and wish your monies to be direct deposited into your account please enclose a voided check with your application.

Sincerely,

Board of Trustees
U.A. Plumbers L.U. #68 Pension Fund

DEFINED CONTRIBUTION PLAN BENEFIT APPLICATION

Instructions:

1. Print all information in ink.
2. Include applicable certified copies of birth certificates(s), marriage license, and divorce decree or death certificate.
3. Include notarized spousal consent if applicable.
4. Include Social Security Disability Award certificate, if applicable.
5. Include copies of any other information you believe is pertinent to your pension application.
6. Sign and date all forms that apply to your pension application.
7. Read and discuss the tax information with your tax advisor.
8. Remember: Your application cannot be processed unless it is complete and accompanied by all necessary documentation.
9. Mail the application and documentation to:

U.A. Plumbers Local Union No.68
Defined Contribution Pension Fund
P.O. Box 8726
Houston, Texas 77249

1. Date of Birth: _____ Home Telephone: _____

2. Name _____ Social Security #: _____
Last First Middle

3. Address: _____

City State Zip

4. Single _____ Married _____ Divorced _____ Widowed _____

5. Spouse's Name: _____ Spouse's Date of Birth _____
Spouse's Social # _____

Date: _____
Member's Signature

Date: _____
Spouse's Signature

AFFIDAVIT

EMPLOYEE'S STATEMENT

I, _____, wish to receive my Defined Contribution Plan benefits in the form of a lump sum, or rollover to a qualified IRA plan.

(Please check below statements that pertain to you):

_____ I hereby swear that the person named in the Spouse's Statement of this document is my current legal spouse.

_____ I hereby swear that all previous Divorce Documents that are related to my Pension have been submitted to the Fund Office.

_____ Date _____ Employee's Signature _____ Social Security No.

_____ State of _____ County of

_____ provided documentation to be the person described above and who executed the foregoing statement.

_____ (Notary Public) _____ (Commission Expiration Date)

SPOUSE'S STATEMENT

_____ Date _____ Spouse's Signature _____ Social Security No.

_____ State of _____ County of

_____ provided documentation to be the person described above and who executed the foregoing statement.

_____ (Notary Public) _____ (Commission Expiration Date)