

**REQUEST BY LIMITED MEMBER FOR TRANSFER OR SEPARATE PENSION**

*When to Use this Form*

*A Form P4 is used by a limited member to choose how to receive a share of benefits under a defined benefit provision if the member is not yet receiving a pension.*

[Please print]

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**To: Administrator of plan/annuity issuer**

Name of plan/annuity - **Telecommunication Workers Pension Plan**

Address of administrator/annuity issuer - **#303-4603 Kingsway**

**Burnaby, BC V5H 4M4**

**From: Spouse of member** [Note: "spouse" includes a person who has lived in a marriage-like relationship with the member for a continuous period of at least two years and also includes a former spouse.]

Name of spouse.....

Address .....

.....

Email address .....

Telephone (home) ..... (work) .....

Social Insurance Number .....

Date of birth .....

[This administrator will use this information to contact you about important matters. Make sure it is accurate and that you promptly advise the administrator of any changes.]

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**In relation to: Plan member**

Name of member .....

Address.....

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Email address .....

Telephone (home) ..... (work) .....

Social Insurance or Pension Plan Identity Number .....

Employer of member .....

**Request**

As the limited member named above, I request [*Check the correct box.*]

- (a) that you transfer from the plan my proportionate share of the commuted value of the member's benefits in accordance with the *Family Law Act* and the *Pension Benefits Standards Act*.
  
- (b) that you provide me with a separate pension from the plan, to be effective the first of the month following receipt of this form by the Plan office (a retirement package will be sent to you).

*[These options are only available after the member is allowed to receive a pension but the pension has not yet commenced.]*

Signed (limited member) .....

Date .....

Signed (witness to signature of limited member)  
.....

Name of witness  
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Address of witness  
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