

TILE LAYERS UNION, LOCAL # 52, NY

253 West 35th Street 12th Floor

New York NY 10001

(212)-505-5050

APPLICATION FOR PENSION

I hereby acknowledge receipt of a copy of the Tile Layers Union, Local # 52 New York Pension Fund and apply for Pension Benefits:

NAME _____

ADDRESS _____

Number Street

City or Borough

State

Zip Code

DATE OF BIRTH _____ TELEPHONE NO. : _____

SOCIAL SECURITY NUMBER _____

MARITAL STATUS – Circle One

Married

Widowed

Single

Divorced

If Married, Please State Spouse's Date of Birth _____

If Married, Please State Spouse's Social Security # _____

IMPORTANT

Proof of age and marriage must be supported by one or more of the following:

BIRTH CERTIFICATE, BAPTISMAL CERTIFICATE, MARRIAGE CERTIFICATE, CERTIFICATE OF SOCIAL INSURANCE AWARD, PASSPORT, INSURANCE POLICY OR ANY OTHER LEGAL DOCUMENT.

I WORKED FOR THE FOLLOWING EMPLOYER(S) IN THE TILE INDUSTRY DURING THE 12 MONTHS PRIOR TO MY RETIREMENT:

FROM TO

LAST DAY WORKED _____

TYPE OF PENSION APPLIED FOR – Circle One

EARLY (62)

NORMAL (65)

DISABILITY

NOTE: REVERSE SIDE TO BE COMPLETED ALSO

I REQUEST MY RETIREMENT TO BEGIN ON THE FIRST DAY OF:

Month and Year

DATE OF LAST INITIATION INTO THE UNION _____

I agree to notify the Board of Trustees of the Tile Layers Helpers Union, Local # 52 New York Pension Fund in writing immediately on acceptance by me of employment with any Employer or former Employer under the Plan.

I agree that Pension eligibility and payments are to be governed in all respect by the provisions of the Pension Plan, or as the same may hereafter be amended; and that the making of any Pension payment and its acceptance by me shall not prevent the Trustees from recovering or in any other way affect their right to recover any payment to me in excess of the amount to which I am entitled under the provisions of the Plan, nor shall the making of any Pension payments to me obligate the Trustees in any way to make further payments in any amount whatsoever except as the same may be provided for by the Plan, as it may from time to time be amended.

Dated _____ Signature _____

Sworn to before me this _____ day of _____ 20_____

NOTARY PRINTED NAME: _____

NOTARY SIGNATURE: _____

NOTARY SEAL & EXPIRATION DATE:

Tile Layers Union 52 Pension Fund
253 West 35th Street
New York, NY 10001
212-505-5050

Deferring Commencement of Benefit Payments

If you are applying for an Early Retirement Pension, your benefit amount will be reduced. This reduction is equal to 6.7% for each year that you are younger than age 65 at the time your pension begins. If you choose to defer payment of your pension to a later date, the amount of the reduction will be less, based upon your age at the time you begin to receive your pension. If you defer payment until you reach age 65, your benefit amount will not be reduced for early retirement. Please refer to your summary plan description for an explanation of the determination of the amount of the Early Retirement Pension

In addition, if you decide to delay receiving a pension until you are older than age 65, your monthly benefit will be actuarially increased for each month by which you are older than age 65, provided you are not working in disqualifying employment. The actuarial increase is equal to 1% for the first 60 months by which you are older than age 65, and 1-1/2% for each month thereafter. If you are not working in disqualifying employment, you must begin receiving your pension no later than April 1 of the year following the year you reach age 70½. Please refer to your summary plan description for an explanation of this increase and an explanation of disqualifying employment.