Cement Masons & Plasterers Trust Funds

Physical Address: 7525 SE 24th Street, Suite 200, Mercer Island, WA 98040 • Mailing Address: PO Box 34203, Seattle, WA 98124 Phone: (877) 367-0528 • Fax: (206) 505-9727 • Website: www.cementmasonstrust.com

Administered by

Welfare & Pension Administration Service, Inc.

THE RETIREMENT STEPS BELOW ARE FOR YOUR INFORMATION ONLY AND ARE NOT TO BE CONSTRUED AS A PROMISE OF BENEFITS

The following is a list of the steps necessary to complete your retirement process. If at any time you have questions regarding your retirement, please feel free to call us and we'll be happy to assist you. Please check off the steps as they are completed:

☐ Complete a Retirement Application

When you wish to retire, you must complete a Retirement application in order to receive retirement benefits. Applications are available from the Administration Office, your Cement Masons and Plasterers Local 528 Union Office or you may print one from the website at www.cementmasonstrust.com. Please allow at least 30 days from receipt of your original application by the Administration Office for your retirement to be processed. You must follow all instructions on the application and submit the original to the Administration Office, along with the following documents applicable to you:

- A photocopy of a Birth or Baptismal Certificate
- A complete copy of any and all Divorce/Legal separation decree(s) with property settlement agreements, and Qualified Domestic Relation Orders (if applicable)

☐ Complete an Application for Individual Account Benefits

Applications are available from the Administration Office, your Cement Masons and Plasterers Local 528 Union Office or you may print one from the website at www.cementmasonstrust.com.

□ Receive your Election Packet

Once your applications are received by the Administration office, you will be sent a packet of paperwork personalized for you (and your spouse if applicable). This packet will include your Election form for your Retirement and Individual Account Benefits (which quotes your monthly benefit amount with all options available to you), Tax form and Bank form.

□ Complete and Return your Election Packet Forms

Election Form

Your Election form must clearly indicate the retirement option you wish to receive. <u>Both you</u> and your spouse (if applicable) must make your Election and sign the form <u>in front of a Notary Public</u>. If you elect to receive one of the Survivor Options, you must also send:

- A photocopy of a Birth or Baptismal Certificate your spouse
- A copy of your Marriage Certificate
- If either you or your spouse have changed your name due to marriage, divorce, or any other reason, it is necessary that you submit supporting documents such as Marriage Certificate(s), or other legal documents pertaining to the name change.

Tax Form

All of your retirement is subject to Income Tax. Federal Income Tax will be withheld based upon your instructions.

Bank Form

We recommend you have your monthly retirement payment sent electronically to your bank each month. Payments are sent to your bank for a deposit on the 1st of each month.

☐ Retirement Benefits approved

When your completed retirement paperwork has been received, processed and approved by the Administration Office, you will receive a letter advising when your retirement benefit payments will begin. If late hours are received from your employer following your retirement, your benefits will be increased retroactive to your retirement date once all hours are received.

☐ Individual Account Benefits approved

Once all your hours worked prior to retirement have been received by the Administration Office, your Individual Account benefit will be paid based upon your election (i.e. either in a Lump Sum payment or added to your pension benefits).

□ Congratulations!

If all the steps are checked above you have completed the retirement process. Thank you for all your years of service with the Cement Masons & Plasterers Retirement Plan.

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APPLICATION FOR RETIREMENT

	Name			2. Soc	ial Security	No.			
	Mailing AddressCity & State								
	Union Local #5. Home						_		
	Cell Phone # () *NOTE: Please attach a copy of your state issued Birth Certificate.								
7.	Type of Retirement for which you are applying: (check one) Normal Special Early Early Disability *If you are electing early retirement with the intention of converting to a disability retirement upon Social Security approval, please ensur you advise the administration office, and complete supplemental form.								
8.	Marital Status (past and present): Never Married Married Separated Divorced – Date of Separation/Divorce** **If your marriage(s) was dissolved after December 31, 1984, your election of benefits may be subject to the rights of a prior spouse. You are required to attach a complete copy of each of your prior dissolution decree(s) and property settlement agreement(s) and/or Qualified Domestic Relations Order(s). The copies must show the document was filed with the court and signed by the judge.								
9.	If currently married, please enter spouse's name, birth date and social security number:								
	NameBirth Date					Social Security No.			
10.	Name of Beneficiary:		Relationship						
11.	Address of Beneficiary:	ress of Beneficiary:							
12.	Name and address of most recent employer in the industry:								
	Last day worked:								
	Name and address of current employer (if different from above):								
	My last date of employment was/or will be:								
	If you are working in WA and plan to retire while still employed, you must submit a current detailed job description.								
	Have you at any time been an owner, partner, corporate officer or otherwise involved in the management of any business while covered by an Operative Plasterers and/or Cement Masons International Association Union contract? Yes No If you replied yes, please provide the information requested below and additional information may be requested:								
	Position of Ownership or M	Tanagement			Name & Address of Business				
13.	List all local unions in which you have held membership or under whose jurisdiction you have worked in the industry.								
					Dates of Membership				
	Local Union No.	Local Union No. City and State			Month	From Year	Month	To Year	
					WIOIIII	I Cai	Wionin	I cai	
14.	In accordance with the terms of the Plan, I hereby request that my								
	(Normal, Special Early, Early or Disability) be effective I agree to furnish any information which the Trustees may require for the								
	determination of my eligibility for a benefit or the amount thereof. (Unless otherwise stated in the Plan document, your retirement effective								
	date will be the first day of the month following the date your application is received).								
15.	understand that this application can be cancelled by my written request any time prior to the retirement date indicated above. I have fully rad understand the information furnished in the Cement Masons and Plasterers Retirement Plan booklet.								
Witness				Member Signature					
Address of Witness				Date					

CERTIFICATION OF EARLY RETIREMENT (for participants under age 63)

To be deemed retired and qualified for Special Early or Early Retirement benefits, a participant must separate and completely refrain from all employment with a contributing plan employer, regardless of whether the employment is covered by a Collective Bargaining Agreement.

retirement effective date will be changed to the first day of the month in which no hours are worked.

Signature

Date

I understand the above stated rule and agree that if any hours are worked in the month I elect to retire; I will not be deemed retired and my

RE-EMPLOYMENT AFTER RETIREMENT RULES (for ALL participants)

Under the Plan, you are required to notify the Trust Office if you return to "post-retirement service." Post-retirement service means employment:

- 1. within the State of Washington;
- 2. in an industry in which Employees earning Credited Service are employed, whether or not such employment is under the terms of the Collective Bargaining Agreement or associate agreement, or in a supervisory capacity over such job classifications; and
- 3. in a trade or craft in which the Employee was employed while earning Credited Service, or in a supervisory capacity over such trade or craft.

Retirees age 63 or over may return to post-retirement service for 350 hours in a Plan Year (April through March) without a suspension of monthly retirement benefits. Thereafter, retirement payments are suspended for any month in which the retiree works more than 40½ hours in post-retirement service.

Retirees under age 63 may return to work for a maximum of 500 hours each Plan Year after a period of retirement of not less than 30 days. If a retiree is employed for one or more hours in any Plan Year after completing 500 hours, retirement payments are suspended for any month in which the retiree works in post-retirement service, and for an additional six months thereafter.

I understand the above stated rules regarding Reemployment After Retirement the Cement Masons and Plasterers Retirement Plan. I will notify your office **immediately** if I return to work in employment, which is or may be considered prohibited.

Signature Date

DOCUMENTS ACCEPTABLE AS PROOF OF AGE (See Note.)

- A) A copy of one of the following documents will be acceptable as proof of age:
- 1. Birth Certificate
- 2. Baptismal Certificate
- B) <u>If neither of the preceding are available, copies of any TWO of the following may be submitted:</u>
- 1. U.S. Census Report (at least 20 years old)
- 2. Passport (may not be photocopied)
- 3. Naturalization or Immigration Papers (may not be photocopied)
- 4. State issued Drivers License
- 5. Family Bible Entries
- 6. Life Insurance Policies (at least 10 years old)
- 7. Marriage License or Application
- 8. Early School Records
- 9. Military Records
- 10. Civil Service Records
- 11. Children's Birth Certificates
- 12. Written Certification from Social Security
- 13. Written Certification of Union Local

NOTE: All documentation submitted as proof of age must clearly show your age in order to be acceptable. Also, if the name shown on the document differs from the present name, a copy of the court order or other document recording the name change should be submitted for identification purposes.