

All members entitled to a lump-sum benefit:

If you break your service with the IWA-Forest Industry Pension Plan, use this form to transfer your lump-sum benefit to an RRSP, LIRA or Registered Pension Plan (RPP). Please note that we cannot process a transfer if this form is not completed correctly. Section A and B must be completed in whole.

SECTION A | APPLICANT INFORMATION

You complete section A.

Last name:		First name and initial(s):																					
Mailing address:																							
City:	Province:	Postal code:																					
Phone number:	Social insurance number: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																						

- Check one:
- I am a member of the IWA-Forest Industry Pension Plan.
 - I am a current or former spouse or a current beneficiary requesting a transfer because of the death of a pension plan member.
 - I am a former spouse requesting a transfer because of a marriage breakdown with a pension plan member.

SECTION B | TRANSFER INFORMATION (to be completed by the receiving institution and signed by applicant)

TRANSFER FROM: I request the direct transfer of my pension benefit from:
 IWA-Forest Industry Pension Plan, 2100-3777 Kingsway, Burnaby, BC V5H 3Z7
 CRA Registration Number: 0373332

TRANSFER TO: Name of receiving institution (*must be a Canadian bank, insurance company, trust company or credit union*):

Have your financial institution complete section B.

Applicant's account number:

- | | |
|---|--|
| <p><u>Funds to transfer (check one):</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Lump-sum <input type="checkbox"/> Excess contributions | <p><u>Applicant account type (check one):</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> RRSP <input type="checkbox"/> RRIF <input type="checkbox"/> RPP |
|---|--|

Address of receiving institution:
 Mailing address:

 City: Province: Postal code:

Employer's name (*only if transferring to member's own RPP*):

You sign and date here →

<p>Applicant's signature:</p>	<p>Date: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">D</td> <td style="text-align: center;">D</td> <td style="text-align: center;">M</td> <td style="text-align: center;">M</td> <td style="text-align: center;">M</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> </table> </p>																					D	D	M	M	M	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
D	D	M	M	M	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y																						

SECTION C TRANSFEROR CERTIFICATION (to be completed by the Plan Office AFTER the funds are transferred)

Ignore section C.
The Plan Office will complete this section once the transfer has taken place.

- I confirm that \$ represents the applicant's whole entitlement in the IWA-Forest Industry Pension Plan.
- I certify that \$ is transferred according to one of subsections 147(19) or 147.3.
- A lock-in provision applies does not apply to \$ of the amount transferred from the IWA-Forest Industry Pension Plan, under the *BC Pension Benefits Standards Act* or another provincial pension benefits act (specify the Act below):

Name of Act:

I certify that the information given on this form is correct and complete.

Name of transferor: IWA-Forest Industry Pension Plan	Signature of Administrator:	Title:	Date: <input type="text"/> D D M M M Y Y Y Y
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SECTION D TRANSFEREE CERTIFICATION (to be completed by the receiving plan AFTER the funds are transferred)

Ignore section D.
Your financial institution will complete this section after the transfer has taken place.

- We have received an amount of \$ and credited it to the applicant's account identified in section B.
- The receiving plan or credited account is registered under the *Income Tax Act*.
- We will administer the amount indicated in section C, Item 3 as a locked-in amount under the receiving plan or credited account.

I certify that the information given on this form is correct and complete.

Name of RRSP or LIRA issuer, DPSP trustee or RPP administrator:	Signature of authorized person:
Title:	Date: <input type="text"/> D D M M M Y Y Y Y