



Appendix A – Transfer Information Request and Authorization Form

You can request a transfer of benefit entitlements into or out of the Special Forces Pension Plan (SFPP) under the *National Transfer Agreement* by completing and submitting an *Appendix A - Transfer Information Request and Authorization Form* to SFPP. Please note that for transfers into SFPP, your transfer application must be received by SFPP within one (1) year of the date you joined SFPP for it to be valid.

Submit the completed form securely online via the Document Centre (available by logging in to your secure online account) at SFPP.ca, or by mail to: SFPP, 5103 Windermere Blvd. SW, Edmonton, AB T6W 0S9

Public Service Defined Benefit Pension Plans Reciprocal Transfer Agreement

Personal Data

given name and initials

surname

previous surname (if applicable)

--	--	--	--	--	--	--	--	--	--

social insurance number

date of birth (yyyy/mm/dd)

mailing address

city, town, village, etc.

province

postal code

primary phone number

Work Home Cell

ext.

secondary phone number

Work Home Cell

fax number

current employer

province

current plan name (the plan you are transferring to)

former employer

province

former plan name (the plan you are transferring from)

I hereby request that the Pension Plan Authorities of my current and former employers submit for my consideration two (2) copies of a transfer estimate under the transfer agreement between the pension plans. All personal information will be handled in a confidential manner, in accordance with the rules applicable to the Plan.

Is there a family property order or agreement between you and your former pension partner dividing your pension benefit?

yes no not applicable

signed this

day of

20

applicant's signature

Under the terms of the *National Transfer Agreement*, you are not eligible to transfer into SFPP until you have been participating in the Plan for at least 20 working days. **Please do not submit this form until you have completed 20 working days in SFPP.**