

LOCAL UNION 786 BUILDING MATERIAL PENSION FUND

300 S. Ashland Ave., Suite 500

● Chicago, Illinois 60607 ●

Telephone (312) 666-1875

Fax (312) 666-2258

PENSION APPLICATION

PLEASE read all instructions carefully. Print your answers to all questions. If you need help in completing this application, please contact the Pension Fund Office.

APPLICANT _____

RETIREMENT DATE _____

TELEPHONE # _____

SECTION I**PARTICIPANT'S PERSONAL INFORMATION**

Name	
Social Security Number	
Street Address	
City, State, Zip	
Alternate Telephone Number	
E-mail Address	
Date of Birth (Attach proof of age. See list on page 3.)	

PARTICIPANT'S MARITAL INFORMATION

Marital Status (Attach copy of, as applicable, marriage certificate, death certificate, divorce decree & QDRO.)	☐ Single ☐ Divorced*, not remarried ☐ Widowed ☐ Married ☐ Remarried, with prior divorce*
Spouse's Name	
Spouse's Social Security Number	
Spouse's Date of Birth (Attach proof of age. See list on page 3.)	
*If DIVORCED, does a QDRO (Qualified Domestic Relations Order) exist?	☐ Yes ☐ No (Note: please provide copy of Divorce Decree and QDRO.)

SECTION II**DIRECT DEPOSIT INFORMATION**

If you would like your monthly benefit forwarded directly to your financial institution, please complete the following:

***Please attach a voided check.**

Name of Bank _____

Address _____

Account No. _____

_____ CHECKING

_____ SAVINGS

Routing No. _____

SECTION III

WORK HISTORY EMPLOYER	LOCAL NO.	JOB TITLE	DATES OF EMPLOYMENT FROM	TO
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you ever received Weekly Accident or Sickness Benefits from the Local Union 786 Welfare Fund?

☐ Yes ☐ No

If yes, fill in the information below:

Name of Employer at Time of Disability	Dates of Weekly Accident or Sickness Benefits From	To
_____	_____	_____
_____	_____	_____

SECTION IV

DISABLED APPLICANTS (Complete this section only if applying for a disability pension.)

1. Have you applied for a Social Security disability? ☐ Yes ☐ No (If yes, attach copy)
2. Has Social Security approved your disability? ☐ Yes ☐ No (If yes, provide copy of disability award)
3. Date permanent disability began _____

SECTION V

I hereby apply for a pension from the Local 786 Building Material Pension Fund. I understand that by making application, I will not work in disqualifying employment with an employer who has a collective bargaining agreement with any union belonging to Joint Council #25, (except where permissible by law), (see Summary Plan Description for more details).

I further understand that it is my responsibility to inform the Fund Office of disqualifying employment. Failure to do so will cause my pension benefits to be suspended and permit the Fund to recover any benefits paid to me that I was not entitled to. Additional penalties may also be imposed.

Name of Applicant: _____ Signature: _____ Date: _____

Name of Spouse: _____ Signature: _____ Date: _____

Application must be submitted at least three months before the date on which Pension payments, if approved, are to begin.

When you submit your application, you will be advised if any further information is required, and you will be notified in writing of the decision made by the Board of Trustees on your application.

INSTRUCTIONS TO APPLICANT FOR RETIREMENT: PROOF OF AGE

In order that your Pension Application may be given consideration, it is necessary that you furnish proof of your age, and proof of your spouse's age. One of the types of proofs listed below must be furnished.

Proof as high in order on the list as possible should be submitted if you have it, or if it is readily obtainable, because such proof is generally more convincing. For instance, if you have or can readily obtain a birth certificate, it should be submitted rather than a baptismal certificate or a statement of birth shown by a church record. If you do not have either of these proofs, or they are not readily obtainable, try to submit the proof listed next in order, rather than one low on the list. Additional proof of age may be requested if the document which you submit is not convincing proof. Therefore, it is to your advantage to furnish a document which is high in order of preference on the list. You must attach a photostat copy of the proof of age to your application. However, you are cautioned that naturalization papers, United States passports, and immigration papers may not be photostated. If any of these is the only proof of age you have, submit the original and it will be returned.

1. A birth certificate.
 2. A baptismal certificate or a statement as to the date of birth shown by a church record, certified by the custodian of such record.
 3. Notification of registration of birth in a public registry of vital statistics.
 4. Certification of record of age by the U. S. Census Bureau.
 5. Hospital birth record, certified by custodian of such record.
 6. A foreign church or government record.
 7. A signed statement by the physician or midwife who was in attendance at birth, as to the date of birth shown on their records.
 8. Naturalization record. (Photostat not permitted, submit original.)
 9. Immigration papers. (Photostat not permitted; submit original.)
 10. Military record.
 11. Passport. (U. S. passports may not be photostated; submit original.)
 12. School record, certified by the custodian of such record.
 13. Vaccination record, certified by the custodian of such record.
 14. An insurance policy which has been in force at least ten years and which shows the age or date of birth.
 15. Marriage records showing date of birth or age (application for marriage license or church record, certified by the custodian of such record; or marriage certificate).
 16. Other evidence such as signed statements from persons who have knowledge of the date of birth, voting records, poll-tax receipts, etc.
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INSTRUCTIONS TO APPLICANT FOR RETIREMENT: PROOF OF MARRIAGE

1. Attach proof of your marriage. (Attach either County Marriage Certificate or Certified Copy of Church Record of Marriage.

NOTES
FOR OFFICE USE ONLY

Date application received _____