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Spouse's Consent and Waiver of Post-Retirement Survivor Benefits

The spouse of a member of the Public Employees Pension Plan is entitled, on the member's death after retirement, to a benefit of at least 60 per cent of the original pension payable to the member.

The options named in Section B do not meet that requirement. Under these three options, it is possible that the spouse will receive no pension - zero dollars - after the member's death. The member can transfer money from the PEPP account to a variable benefit account, a prescribed registered retirement income fund contract, or a life annuity with a less than 60 per cent survivor benefit only if the spouse agrees to the transfer and notifies PEPP by completing this form and submitting it to the address listed above. **PLEASE SEND IN ORIGINAL FORM.**

This form must be completed and signed by the spouse outside the immediate presence of the member.

This form is designed based on Saskatchewan legislation. Please contact PEPP if you are or were working outside Saskatchewan as your pension may be subject to the legislation of another province.

SECT	ON A: MEMBER AND SPOUSE'S INFORMATION	(Please print)		
Last Na	me of Member	First Name and Initial of Member		
Mailing	Address City	Province Postal Code		
Memb	er's PEPP Account Balance (day/month/year)	PEPP Member Number		
I	as at/	TELL Member Number		
	's Last Name	Spouse's First Name and Initial (For definition of spouse, please refer to the PEPP Member Booklet)		
SECT	ON B: DETAILS OF THE TRANSFER			
I here	by authorize the member to direct the account bala	nce at the date of the transfer as follows:		
a. b. c.	PEPP Variable Pension Benefit (VPB) prescribed Registered Retirement Income Fund (p Life Annuity with less than 60% survivor benefit	% spouse's initial here		
SECT	ON C: SPOUSE'S CONSENT TO THE TRANSFER	to Variable Pension Benefit or pRRIF		
1.	(Complies with Form 1 PBF I understand that the member wants to transfer money to a variable benefit account (hereinafter called "the account") in accordance with section 29.2 of <i>The Pension Benefits Regulations</i> , 1993, and/or to a prescribed registered retirement income fund (pRRIF) contract (hereinafter called "the contract") in accordance with section 29.1 of <i>The Pension Benefits Regulations</i> , 1993 and that my written consent is required to enable the member to make the transfer.			
2.	I declare that, by signing this consent and filing it wit	h the administrator of the plan:		
	a. I am authorizing the member to manage the money in the account and/or the contract, subject to the minimum annual withdrawal payment required by the <i>Income Tax Act</i> (Canada); and			
	b. I understand that:			
	9 ,	nent to the account or contract will allow the owner to manage nnual withdrawal payment required by the <i>Income Tax Act</i>		
		tion imposed under the account or the contract and I am art or all of the balance of the money at any time.		
3.	I certify that this consent is being signed freely and vo	pluntarily without any compulsion on the part of the member		

and outside the immediate presence of the member.

SECTION D: SPOUSE'S WAIVER OF 60 PER CENT POST-RETIREMENT SURVIVOR BENEFIT

(Complies with Form 3 PBR)

- 1. I understand that, in the absence of this waiver, on the death of the member, I am entitled to a pension of at least 60 per cent of the original amount of the pension payable to the member.
- 2. I also understand and declare that, by signing this waiver:
 - a. I am giving up my entitlement, on the death of the member, to a survivor benefit of at least 60 per cent of the original amount of the pension payable to the member;
 - b. I am permitting the member to receive a pension that does not comply with section 20(5) of *The Public Employees Pension Plan Act* or with section 34 of *The Pension Benefits Act*, 1992; and
 - c. On the death of the member, I may receive no pension or may receive a pension of less than 60% of the original amount of the pension payable to the member
- 3. I certify that this waiver is being signed freely and voluntarily without any compulsion on the part of the member and outside the immediate presence of the member.
- 4. I understand that this waiver must be completed and signed **no more than 90 days** prior to the application for the VPB.
- 5. I understand that I may revoke this waiver at any time before pension commencement or transfer of funds by providing written notice to the administrator of the pension plan or issuer of the contract, as the case may be.

SECTION E: CERTIFICATE OF CONSENT AND WAIVER

I certify that I am the spouse of the above named member and that I have read and understand the content of the above sections. By signing this certificate I consent to the transfer of money from the member's account as set out in Section B and waive my entitlement to a survivor benefit of at least 60 per cent.

This form must be completed in its entirety and signed, in the presence of a witness, outside the immediate presence of the member. The form must be filed with the administrators of the Public Employees Pension Plan (see address on front page).

We strongly urge the spouse to seek independent legal advice before signing this waiver.

Signature of Spouse (electronic	signature will not be accepted)	Signature of Witness (must be an adult and cannot be the member)		
Witnessed by me at the	in the			
orovince of		, country of		
thisday of			_	
Print Name of Witness		Address of Witness		
SECTION E. TO DE COM	DI ETED DV DEDD ADMIN	HCTRATION.		
SECTION F: TO BE COM	PLETED BY PEPP ADMIN	IISTRATION		
Entered by	Date	Confirmed by	Date	

For more information, visit our website at pepp.plannera.ca or see the contact information on the front of this form.