



PERSON ID

Municipal Pension Plan

PO Box 9460
Victoria BC V8W 9V8

Location 2995 Jutland Road, Victoria

Web mpp.pensionsbc.ca

Victoria 250 953-3000
Vancouver 604 660-5366
Toll-free in BC 1 800 668-6335
Fax 250 953-0421
E-mail MPP@pensionsbc.ca

INSTRUCTIONS:

- This form is to be completed by an employee who is eligible to contribute under the Municipal Pension Plan Rules (the "Pension Plan"), has previously waived enrolment and now chooses to contribute. (See page 2 for eligibility.)
- Submit a copy of the *Waiver of Pension Coverage* with this form.
- The employee and the employer should each retain a copy of this form for their records.
- This form should not be used for mandatory enrolment.

EMPLOYER NAME

EMPLOYER NO.

EMPLOYEE LAST NAME

EMPLOYEE FIRST NAME

EMPLOYEE SOCIAL INSURANCE NO.

HIRE DATE

YYYY / MM / DD

SPOUSE LAST NAME

SPOUSE FIRST NAME

SPOUSE DATE OF BIRTH

YYYY / MM / DD

SPOUSE SOCIAL INSURANCE NO.

Employee Declaration:

1. I understand that I am eligible to enrol in the pension plan.
2. I have been provided with an explanation or summary of the pension plan, and of the relevant entitlements and obligations under the pension plan.
3. I wish to enrol in the pension plan.
4. By signing this form, I understand that contributions will be deducted from each payment of salary made to me in accordance with the rules of the pension plan.
5. I understand that this election is irrevocable and that I may not terminate my membership in the pension plan, except in accordance with the rules of the pension plan.
6. I understand that by signing below, contributions to the pension plan will not be retroactive in respect of any prior service.
7. I expressly revoke any previous election made by me to waive enrolment in the pension plan.

By signing below, I expressly elect to participate in the pension plan.

EMPLOYEE SIGNATURE

DATE SIGNED (*contribution start date*)

YYYY / MM / DD

Freedom of Information and Protection of Privacy Act—The personal information on this form is collected under the authority of the *Public Sector Pension Plans Act* and will be used by the Pension Corporation to administer a plan member's pension and other non-pension benefits. If you have any questions about the collection and use of this information, contact the Chief Executive Officer at 2995 Jutland Road, Victoria BC V8T 5J9 or by telephone at 250 387-1002.

RETURN ORIGINAL TO PENSION PLAN

EMPLOYER AND EMPLOYEE MAKE A COPY FOR YOUR RECORDS

Municipal Pension Plan Eligibility Conditions

There are some employees who may opt out of joining or enrolling in the plan, but they must sign a *Waiver of Pension Coverage*. These employees include:

- employees who earn at least 35 per cent of the YMPE* in each of two consecutive years of continuous employment, with one or more plan employers,
- existing employees who were employed when their employer first became a plan employer, and who would otherwise be subject to mandatory enrolment, and
- employees who are permitted, but not required, to enrol by resolution of the employer.

Once members begin to contribute to the plan, they must continue to contribute, regardless of any change in their employment status (full- or part-time) and regardless of whether enrolment was mandatory or optional. If the member moves to another employer who is also an employer under the plan, and has a break in service of less than 30 days, the member must immediately begin contributing for the new employment as well.

*YMPE: The Year's Maximum Pensionable Earnings (YMPE) is the maximum salary, including overtime, upon which Canada Pension Plan contributions are made, as set by the federal government. We post the current YMPE on our website each year.