

## **Applying to Transfer**

You can request a transfer of benefit entitlements into the Local Authorities Pension Plan (LAPP) under the Federal Transfer Agreement by submitting an *Appendix A2* - *Request for Transfer Estimate*. Please note that your transfer application must be received by our administrator, Alberta Pensions Services Corporation (APS) and by Public Works and Government Services Canada within one year of the date you joined LAPP for it to be valid.

LAPP c/o Alberta Pensions Services Corporation (APS) 5103 Windermere Blvd SW Edmonton, AB T6W 0S9

Public Works and Government Services Canada Government of Canada Pension Centre Mail Facility 150 Dion Blvd PO Box 8000 Matane, QC G4W 4T6 ATT: Pension Transfer Services Section

Personal information on this form is collected under the authority of section 9.2 of the Alberta *Public Sector Pension Plans Act* and section 33 of the Alberta *Freedom of Information and Protection of Privacy Act* for the purpose of a member applying for a transfer of pension entitlements. If you have any questions regarding the collection of this information, please contact the Member Services Centre (MSC) at 1-877-649-LAPP(5277), or write to LAPP, c/o 5103 Windermere Blvd. SW, Edmonton, AB T6W 0S9.

## **APPENDIX A2 - REQUEST FOR TRANSFER ESTIMATE**

Transfer from the Government of Canada to the Province of Alberta [Management Employees Pension Plan/Supplementary Retirement Plan for Public Service Managers]
[Public Service Pension Plan] [Local Authorities Pension Plan]

PART I: EMPLOYEE INFORMATION - P	ROVINCE OF ALBERTA (To be completed	by the Employee)
Member First Name	Member Last Name	Social Insurance Number
Member Previous Last Name, if different from above	Date of Birth   Y   Y   Y   M   M   D   D	Gender (M/F) Former Pension Plan ID No
Home Address		Address Effective Date
		Y
		Member Email Address
City	Province	Postal Code
Oily .	. To since	
Home Telephone Number	Work Telephone Number	
Area Code         Telephone Number	Ext Area Code Teleph	one Number
Name of Former Employer		
Is there a Matrimonial Property Order that affects your federal pension?	Check <sub>M</sub> One	
	□ Yes □ No	
Period of pensionable service to be transferred:		
From (Date)	To (Date)	
PART II: EMPLOYEE'S AUTHORIZATION	N (To be completed by the Employee)	
I hereby authorize the President of the Tre including my social insurance number.	asury Board to release the information nece	ssary to produce a transfer estimate,
a transfer of funds under the terms of the p	nent does not constitute a request for transfe bension transfer agreement, I must complete yed and an active contributor under the PLA ment.	form APPENDIX B2 (Request for
The personal information provided will be twith my request in accordance with the ap	reated as confidential and will be disclosed oplicable provincial and federal legislation.	only to those persons authorized to deal
MEMBER SIGNATURE		DATE SIGNED (YYYY/MM/DD)
Member — A duly signed copy of this A	sppendix A2 must be returned to each of t	<del>-</del>
Public Works and Government Services C Government of Canada Pension Centre M 150 Dion Boulevard PO Box 8000 Matane, QC G4W 4T6 ATT: Pension Transfer Services Section		ons Services Corporation nere Boulevard SW 3 T6W 0S9
PART III: PENSION PLAN INFORMATIO	N (To be completed by Alberta Pensions Services	Corporation)
Name of Present Employer	Date of Employment with Present Employer	Current Pension Plan ID NO.
Date of Receipt (Appendix AI):		
Y		
•		
Completed by:	(PRINT NAME AND TITLE)	
	(······ (vine / viz / 11164)	
SIGNATURE		DATE SIGNED (YYYY/MM/DD)