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Long Island City, NY 11101



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NYCERS USE ONLY

F352

Election by a Retiree Reentering City Service to Rejoin NYCERS

This form is for retirees who are reentering City service and who wish to rejoin NYCERS. This form must be completed and returned to NYCERS within 90 days after your return to City service. Do not file this form if you are currently a disability retiree and wish to return to City service. Disability retirees who wish to return to City service should contact NYCERS' Call Center at (347) 643-3000 to schedule an appointment with NYCERS' Medical Board to determine if you are eligible to return.

If you do not wish to rejoin NYCERS, do not file this form. Alternatively, you can file an election under Retirement and Social Security Law (RSSL) §212 by completing Form #353. You can file Form #353 online – register for/log in to MyNYCERS at www.nycers.org, visit the "Message Center," and look for "Tasks" to complete Form #353 online. Filing Form #353 will allow you to earn up to \$35,000* before your pension is suspended. **NOTE: If the address you provide on this form is different from your address in NYCERS' system, the new address will become your official address in NYCERS' records.** Should you have any questions, please contact NYCERS' Call Center at (347) 643-3000.

Pension Number	Last 4 Digits of SSN	Home Phone Number () ()	Work Phone Number () ()
First Name		M.I.	Last Name
Address			Apt. Number
City		State	Zip Code

Title

I have reentered City service as a in the Department of

[MM/DD/YYYY]

effective at a salary of

\$ per annum.

I understand that this form must be completed and returned to NYCERS within 90 days after my return to City service. I understand that I will forfeit my right to rejoin NYCERS if I do not file this form within the 90 day period. I acknowledge that filing this form will trigger the suspension of my pension payments above the statutory amount. I may revoke this form at any time during my post-retirement public employment by filing a notarized letter with NYCERS requesting its revocation.

**This is the earnings limitation specified in §212 of the RSSL effective January 1, 2020. It may be increased by an act of the New York State Legislature. Please consult the Legislation section of NYCERS' website to see if legislation has been enacted to increase the limitation.*

Signature of Member	Date

This form must be acknowledged before a Notary Public or Commissioner of Deeds.

State of _____ County of _____ On this ____ day of _____ 20____, personally appeared before me the above named, _____ to me known, and known to me to be the individual described in and who executed the foregoing instrument, and they acknowledged to me that they executed the same, and that the statements contained therein are true.

If you have an official seal, AFFIX IT

Signature of Notary Public or Commissioner of Deeds _____
Official Title _____ **Expiration Date of Commission** _____

