

NYCERS

NEW YORK CITY EMPLOYEES' RETIREMENT SYSTEM

MAIL ONLY:

335 ADAMS STREET,
SUITE 2300
BROOKLYN, NY 11201-3724

CUSTOMER SERVICE CENTER:

340 JAY STREET,
MEZZANINE LEVEL
BROOKLYN, NY 11201-3724
TEL: (347) 643-3000

EXECUTIVE DIRECTOR: DIANE D'ALESSANDRO

FOR OFFICE USE ONLY

RETIREMENT AND BENEFITS

Election of 20-Year Retirement Program

Tier 3 NYC Correction Members of the Rank of Captain or Above

CLOCK-IN-DATE

This is an election form for Tier 3 Correction members of the rank of Captain or Above who were promoted to such position on or after October 19, 2004 and wish to participate in the Correction Captains 20 Year Retirement Program. Please read the conditions below and complete the requested information. Should you have any questions regarding this program please contact our Call Center at 347-643-3000.

Membership Number _____ Last 4 Digits of Social Security # _____

First Name _____ Middle Initial _____

Last Name _____

Address _____ Apt. Number _____
Zip _____

City _____ State _____ Code _____

Home Phone Number (____) _____ - _____ Work Phone Number (____) _____ - _____

I Understand That In Order For This Election To Be Valid:

1. I must have become a NYC Correction member of the rank of Captain or Above on or after October 19, 2004
2. I must file this application within 90 days of becoming a NYC Correction member of the rank of Captain or Above
3. I must be in active service at the time of filing
4. I am a Tier 3 member

I Further Understand That This Election Is Irrevocable.

To New York City Employees' Retirement System (NYCERS):

I hereby elect to participate in the 20-Year Retirement Program (Tier 3) for New York City Correction members of the rank of Captain or Above, and I further elect to contribute to the retirement system for the right to retire under the program.

Signature of Member _____ Date _____
M M D D Y Y Y Y

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 he or she acknowledged to me that he or she executed the same, and that the statements contained therein are true.

Signature of Notary Public or Commissioner of Deeds _____

Official Title _____

Expiration Date of Commission _____

If you have an official seal, affix it.

