

# NYCERS

NEW YORK CITY EMPLOYEES' RETIREMENT SYSTEM

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BROOKLYN, NY 11201-3724  
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EXECUTIVE DIRECTOR: DIANE D'ALESSANDRO

RETIREMENT AND BENEFITS

FOR OFFICE USE ONLY

CLOCK-IN-DATE

## 25 Year/Age 50 Plan Election Form - Reopener for Automotive Service Titles\*

This application is for Tier 2 and Tier 4 members employed in certain *Automotive Service* titles who wish to elect the 25-Year/Age 50 Retirement Program for Tier 2 or Tier 4 Automotive Service titles. Please be sure to read the conditions below and complete the requested information. Should you have any questions regarding this application, please contact our Call Center at 347-643-3000.

\*Members employed in the following *Automotive Service* titles on the date they intend to file this application are eligible to elect participation in the 25-Year/Age 50 Retirement Plan provided this application is filed no later than **April 14, 2008** are defined as: Senior Stationary Engineer, Stationary Engineer, Auto Mechanic (Diesel), Auto Electrician, Auto Machinist, Machinist, or Machinist Helper.

Membership Number  Last 4 Digits of Social Security #

Title

First Name  Middle Initial

Last Name

In Care of (if applicable)

Address  Apt. Number

City  State  Zip Code

Home Phone Number (  )  Work Phone Number (  )

### ONCE THIS APPLICATION IS RECEIVED BY NYCERS IT CANNOT BE REVOKED

I understand that by signing this form and filing it with NYCERS, I am electing to participate in the 25-Year/Age 50 Retirement Program for Tier 2 or Tier 4 Automotive Service titles. I understand that this election is IRREVOCABLE. I also understand that electing this plan by filing this application means I will be required to make Additional Member Contributions to NYCERS for the right to retire under this plan.

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 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.

