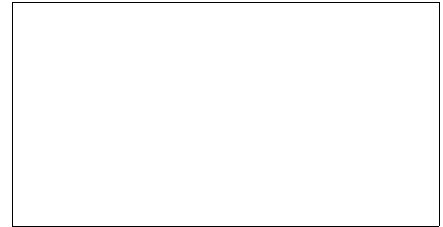




Mail completed form to:  
30-30 47th Avenue, 10th Fl  
Long Island City, NY 11101



**Application for Service Retirement - Tier 1**

This application is for all Tier 1 members who wish to apply for retirement. A properly completed application for service retirement must be filed with NYCERS, not less than 30, nor more than 90 days prior to your effective date of retirement. Please read the Instructions before submitting this application. **NOTE: If the address you provide on this form is different from your address in our system, the new address will become your official address in our records.** If you have any questions, contact our Call Center at 347-643-3000.

No advance (partial) pension payment will be sent to you until NYCERS has a copy of your birth certificate on file.

Member Number	Last 4 Digits of SSN	Date of Birth [MM/DD/YYYY]	Home Phone Number	Work Phone Number
		/ /	( )	( )
First Name		M.I.	Last Name	
Address				Apt. Number
City			State	Zip Code
Agency		Title		

I, the undersigned, hereby make application for retirement from City service to take effect on  , with my retirement allowance to begin on the effective date of my retirement, or on the initial date of payability, whichever is later.

When you calculate my estimated retirement benefit, please use the following person:

Name

Relationship  who is my  , and whose birth date is  ,

to estimate my joint-and-survivor options. **(Note: This form is not a designation of beneficiary. See Instruction Page for additional details)**

**Federal Tax Withholding**  
Federal tax law provides that all payers are required to withhold Federal income tax on periodic payments (similar to wages), unless you elect to be excluded from such withholding. This election will remain in effect until revoked by you. If you do not complete this election, Federal income tax will be withheld at the rate of a married individual claiming three exemptions.

**Please indicate your withholding selection by marking the appropriate choice below:**

1.  Do not withhold Federal income tax from my pension. (Do not complete 2 or 3 if you select this option)

2.  Withhold based on  number of exemptions using the following status (You **may** also enter a dollar amount in choice 3):  
 (Check one only)     Single                       Married                       Married, but withhold at higher "Single" rate

3.  In addition to the amount withheld based on my exemptions and filing status in choice 2,  
 I would like to withhold \$  Per Month (Must specify dollar amount only)

**Note:** You cannot enter an amount here without entering a number of exemptions in choice 2 (even if that number is zero).

**Sign this form and have it notarized, Page 2**



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Long Island City, NY 11101

Member Number	Last 4 Digits of SSN

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.

If you have an official seal, affix it

Signature of Notary Public or  
Commissioner of Deeds \_\_\_\_\_

Official Title \_\_\_\_\_

Expiration Date of Commission \_\_\_\_\_

**Sign this form and have it notarized, THIS PAGE**



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Long Island City, NY 11101

**INSTRUCTIONS FOR COMPLETING THIS FORM**

**Please read the following information carefully before completing this application**

Before filing this application with the New York City Employees' Retirement System (NYCERS), you must check with your agency to determine if you are entitled to payment of any terminal leave or accumulated annual leave. If it is determined that you are entitled to be paid on the payroll for any leave time due you, the agency will advise you what your last day of pay will be. **The effective date of retirement requested on this application should be the day after the last day you are paid by your agency.**

A properly completed application for service retirement must be filed with NYCERS, not less than 30, nor more than 90 days prior to your effective date of retirement.

You must be in City service on the date this application is filed with NYCERS, and you must remain in City service up to the effective date of your retirement. (A member carried on an agency payroll on a leave of absence without pay is considered in City service for retirement purposes.)

This application for service retirement may be withdrawn by you, any time prior to the effective date of your retirement, by filing a written request with NYCERS.

This application is a self-effectuating document. If a valid application, it becomes effective on the date requested by you, even if you continue in City service after your effective date of retirement.

You should check with NYCERS before accepting any employment in the public sector after your effective retirement date. You may be employed after retirement in New York City or New York State public service if you secure approval for such employment under §211 or §212 of the Retirement and Social Security Law. You may be employed by the Federal government or in private industry without affecting your retirement benefits from NYCERS.

- If you need assistance completing this form please contact NYCERS at 347-643-3000.
- Complete this form in ink or type. Except for signature, please print all items.
- At the top of the form, print your Membership #, Social Security #, Date of Birth, name and complete address.
- When you receive your Retirement Options letter from NYCERS, you will be given the choice of electing to receive the Maximum Retirement Allowance or providing for payment of a benefit to your surviving beneficiary(ies). With the Maximum Retirement Allowance, all payments cease at the time of your death. If you select an option to provide for payment of a benefit to your beneficiary(ies), that beneficiary's life expectancy is factored into the calculation that determines an annual joint-and-survivor pension. For the purpose of preparing an Estimated Retirement Benefit, we will use the life expectancy of the person you named on this form. Naming the person on this form DOES NOT constitute an official designation of beneficiary. That must be filed with NYCERS on a separate form.
- Be sure to sign the form, in the space provided for Signature of Member, in the presence of a Notary Public or Commissioner of Deeds.
- Page 2 of this form must be acknowledged before a Notary Public or Commissioner of Deeds.
- Do Not make erasures, use white-out or cross-out any typed or printed information on this form, inasmuch as it renders the form invalid.
- You must return all pages of this form even if you have intentionally left portions blank. You do not have to return the Instruction Page if you received or downloaded it as a stand alone page.

**Sign this form and have it notarized, Page 2**