



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



**Application for Service Retirement
Tier 1 Members of the NYC Transit Authority**

This is an application for service retirement for Tier 1 members of the NYC Transit Authority operating force. 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
Transit Authority	

I, the undersigned, hereby make application for retirement from City service to take effect on [MM/DD/YYYY] / / , with my retirement allowance to begin on the effective date of my retirement, or upon my attainment of age 50, whichever is later. When you calculate my estimated retirement benefit, please use the following person to estimate my joint and survivor options:

Name

who is my Relationship , and whose date of birth is [MM/DD/YYYY] / / .

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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Member Number	Last 4 Digits of SSN

Note: If you should die on or after the date that your service retirement becomes effective and before you have received your first payment of your retirement allowance, you will be retired under Option 1, even if you have previously selected an option.

Please indicate below the person who you wish to receive this benefit.

I hereby nominate the following person to receive benefits:

First Name	M.I.	Last Name
Full Social Security Number	Date of Birth [MM/DD/YYYY]	Relationship
	/ /	
Address		Apt. Number
City	State	Zip Code

If this beneficiary is a minor, check here and complete the guardian information on **Form 137**

I, the undersigned, make application for payment of my Service Retirement Benefit.

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.

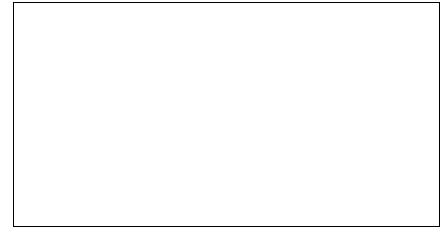
If you have an official seal, affix it

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

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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 the Transit Authority 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 the Transit Authority.**

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

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