NECA-IBEW Pension Trust Fund





2120 Hubbard Avenue • Decatur, IL 62526-2871 217-875-0254 • 800-765-4239 • Fax 217-875-9563

REQUEST FOR ADVANCE DETERMINATION OF RE-EMPLOYMENT STATUS

Under the rules of this pension plan, a retiree may request an opinion to whether or not his/her benefits would be suspended if he/she returns to work in a particular job.

If you are currently considering re-employment and wish to know in advance whether or not such re-employment is likely to result in a suspension of pension payments, please provide the following information.

Your name			Social Security No	Social Security No	
Your	mailing address		City/State	7:	
	Street		Chy/State	Zip	
Phone	number ()		_		
Nama	and address of the ample.				
Name	and address of the employ	er with whon	n you may work		
- 22					
	Street		City/State	Zip	
Туре	of work:				
a.	☐ Construction	or	☐ Non-Construction		
b.	☐ Supervisory Work	or	☐ Non-Supervisory Work		
Туре	of trade or craft involved _				
Locati	ion of work or job site				
	per of hours which you exp				
	ss than 5 hours		□ 10-20 hours		
□ 5-9	hours		☐ More than 20 hours		
How I	How long do you expect this job to last?		weeks		

All information requested above must be provided in order to properly advise you regarding the effect of re-employment on your pension benefits. The Fund Office will forward an advisory opinion to you with (10) working days after this request is received. The opinion will be based solely on the information which you provide. If any information is inaccurate or if the facts change at the time you actually return to work, the trustees reserve the right to change their opinion.

MAIL OR DELIVER TO:

Board of Trustees

NECA-IBEW Pension Trust Fund

2120 Hubbard Ave. Decatur, IL 62526 (217) 875-0254

