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Lifetime Pension Spouse's Waiver of Designated Beneficiary Status

This form should be completed **only** if the spouse of the member wishes to waive his or her entitlement as designated beneficiary. This form must be completed and signed by the spouse outside the immediate presence of the member.

1 TO BE COMPLETED BY MEMBER'S SPOUSE (Please print)			
PEPP Member Number	Member's Last Name, First Name a	nd Initial	
Member's Mailing Address		City	
Province	Postal Code		
Spouse's Last Name, First Name and Initial			
Spouse's Mailing Address (if diff	erent from above)		

SPOUSE'S WAIVER OF DESIGNATED BENEFICIARY STATUS

I certify that I am the spouse (within the meaning of *The Public Employees Pension Plan Act* – see section 2(1)(ff) of *The Pension Benefit Act*, 1992) of the above named member of the Public Employees Pension Plan (PEPP), bearing the Canada Revenue Agency (CRA) Registration Number 0578179 as being subject to the provisions of *The Pension Benefit Act*, 1992.

- 1. I understand that, in the absence of this waiver, on the death of the member, I am entitled to a benefit from the Lifetime Pension account to the extent permitted by the *Income Tax Act* (Canada).
- 2. I understand and declare that, by signing this waiver and filing it with PEPP:
 - a) I am giving up my entitlement as a designated beneficiary; and
 - b) on the death of the member, any benefit remaining in the Lifetime Pension account will be paid, to the extent permitted by the *Income Tax Act* (Canada):
 - to the beneficiary designated by the member if the designated beneficiary is a person other than myself; or
 - to the personal representative of the member's estate in his or her representative capacity if there is no valid designation of a beneficiary.
- 3. I acknowledge that I may receive **zero (\$0.00) dollars** as a surviving spouse from PEPP in the event of the death of the member.
- 4. I certify that this waiver is being signed freely and voluntarily without any compulsion on the part of the member and outside the immediate presence of the member.
- 5. I understand that I may revoke this waiver at any time prior to the date of the member's death by providing written notice to PEPP.

3 SIGNATURE OF SPOUSE AND WITNESS

This form must be completed in its entirety and signed, in the presence of a witness, outside the immediate presence of the member. The form must be filed with PEPP (see address below).

Signature of Witness (must be an adult and cannot be the member)

Witnessed by me at the city/town/village of ______

Print Name of Witness

______, country of ______ day of

, 20___.

Address of Witness

____ in the province of

PEPP Lifetime Pension Spouse's Waiver of Designated Beneficiary Status

Comments and Instructions

This waiver must be completed by the spouse of the member who holds a PEPP Lifetime Pension where the spouse wishes to waive his or her entitlement to be the designated beneficiary under subclause 11.1(7) of *The Public Employees Pension Plan Regulations, 2015*. The waiver must be completed before the date of death of the member and filed with The Public Employees Pension Plan (PEPP). The waiver may be revoked by the spouse at any time before the member's death by providing written notice to PEPP.

By completing and signing this waiver, the spouse waives all or a portion of his or her entitlement to the benefit remaining in the Lifetime Pension account on the death of the member. When a spouse waives his or her entitlement to a benefit, the waiver allows the member to designate a beneficiary of the member's choice. Prior to signing this waiver, the spouse should seek the advice of a lawyer and a qualified financial advisor.

Under The Pension Benefits Act, 1992, a spouse is the spouse of a former member at the day on which the pension is payable to the former member. The most current definition of spouse can be found in the PEPP Talk on Designation of Beneficiary.

For more information, please contact:

Public Employees Pension Plan (PEPP)P1000 - 1801 Hamilton StreetEREGINA SK S4P 4W3VAdministered by Plannera Pensions & Benefits

Phone: 306-787-5442 (in Regina) or Toll free at 1-877-275-7377 Email: pepp@plannera.ca Website: pepp.plannera.ca