

**FORM 1
WAIVER OF 60% JOINT PENSION ENTITLEMENT UNDER A PENSION
PLAN DUE TO TERMINAL ILLNESS OR DISABILITY**

*The Pension Benefits Act, Sections 21(6) and 23
Pension Benefits Regulation, Division 7 of Part 10*

COMMENTS AND INSTRUCTIONS

This form must be completed by the spouse or common-law partner of a member of a pension plan when the member wishes to receive his or her pension as a payment or series of payments as a result of shortened life expectancy.

Prior to completing this form, the spouse or common-law partner should consider obtaining independent legal advice concerning his or her individual rights and the effect of this waiver as well as qualified financial advice about the financial consequences.

This form must be:

- completed in its entirety;
- signed by the spouse or common-law partner, and witnessed while the member is not present;
- filed with the administrator;
- used for benefits earned under a pension plan subject to *The Pension Benefits Act* of Manitoba and Regulation.

For further information please contact the administrator.

Definitions

Administrator

Means in relation to a pension plan, the person or body of persons responsible for administering the plan.

Common-law partner of a member means

(a) a person who, with the member, registered a common-law relationship under section 13.1 of *The Vital Statistics Act*, or

(b) a person who, not being married to the member, cohabited with him or her in a conjugal relationship

(i) for a period of at least three years, if either of them is married, or

(ii) for a period of at least one year, if neither of them is married.

Joint survivor pension

Means a form of pension that pays a pension on retirement to the member for his or her lifetime and, after death, to the spouse or common-law partner for his or her lifetime.

Member

Means an employee or former employee who is accruing or entitled to a pension under a pension plan, but is not yet retired and receiving a pension under the plan.

Shortened life expectancy

Means a life expectancy that has been shortened by reason of a terminal illness or disability to less than two years.

Spouse

Where used in relation to another spouse means the person who is married to that other spouse, and "spouses" mean two persons who are married to each other.



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I, _____, am the spouse or common-law partner
(as described above) of _____.
(name of member)

The member earned benefits under a pension plan subject to *The Pension Benefits Act* of Manitoba (Act) and Regulation, and was employed in Manitoba on the day he or she ceased to be an active member of the plan.

I understand that under the Act

- I am entitled to a joint survivor pension on the member's death that must be at least 60% of the pension payment that was payable to the member;
- I may waive my entitlement to the joint survivor pension after completing this waiver;
- if I sign this waiver I will no longer be entitled to a joint survivor pension on the member's death;
- the waiver can be revoked.

I certify that

- I have read this waiver and understand it;
- I have read one of the following:
 - the member's most recent annual statement from the administrator;
 - the member's termination statement from the administrator,

and know the value of the pension as of the date of the statement that may be received by the member as a payment or series of payments;

- I am aware of the consequences of waiving the joint survivor pension, and despite the consequences, I waive it;
- I am not living separate and apart from the member by reason of a breakdown of our relationship;
- the member is not present while I am signing this form;
- I am signing this waiver or consent of my own free will without duress, coercion or compulsion of any kind; and
- I realize that:
 - this form only gives a general description of the legal rights I have under the Act and the regulation, and

- if I wish to understand exactly what my legal rights are, I must read the Act and the regulation and seek legal advice.

I hereby waive my entitlement to a joint survivor pension by signing this form in the presence of a witness.

I sign this form at

_____ (city/town) _____ (province/territory/state) _____ (country)

this _____ day of _____, _____

(signature of spouse or common-law partner)

I, _____, of _____
(print name of witness)

(print address of witness)

do witness the signature of the spouse or common-law partner who signed this form before me outside of the presence of the member.

(signature of witness)

Reference:

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