



BCTF—Salary Indemnity Plan

100-550 West 6th Avenue, Vancouver, BC V5Z 4P2 • 604-871-1921 • 1-800-663-9163 • Fax 604-871-2287 • e-mail: benefits@bctf.ca 

Dear Member,

As requested, attached (overleaf) is an application form for withdrawal from the long term section of the Salary Indemnity Plan.

The Salary Indemnity Plan provides that a member who has either attained the age of 64, has reached *Factor 88*, or, is in receipt of a retirement pension under a registered pension plan, may voluntarily withdraw from the long-term section of the plan.

If one of the foregoing conditions occurs during a school year, you may apply to withdraw at any time during that school year. Applications received in September will be effective September 1. Applications received in other months will be effective the first day of the following month or the first day of a subsequent month, if so requested.

To speed this application, please enclose a copy of:

1. birth certificate or government identification for proof of age
2. proof of contributory service in BC such as a *Teachers' Pension Plan Member's Benefit Statement*
3. proof of contributory service in a province with a reciprocal agreement, if applicable, or
4. proof of benefits from a registered pension plan, if applicable.

In making application for withdrawal, you should ensure that in the event of serious illness or accident you have sufficient accumulated sick leave which, when combined with 120 days of benefit from SIP: Short-term, will protect your salary to the end of the month in which you attain the age of 65 or reach *Factor 90*.

Please note:

As per the *Salary Indemnity Plan—Regulation 21—Duration of benefits*, members are not eligible for long-term disability coverage beyond the end of the month they reach “factor 90,” or the end of the month they attain age 65. Therefore:

1. if you have reached *Factor 90*, please ensure that you complete this application to withdraw from the long-term portion of the Salary Indemnity Plan
2. for teachers reaching the age of 65, or in receipt of a pension from the Pension Corporation of BC, no application for withdrawal is required, please contact your employer directly and they will stop deducting the long-term portion of the SIP fee.

If you have any questions, please phone the Income Security Division at the BC Teachers' Federation.

Please send your application to the Salary Indemnity Plan, BCTF via mail, fax, or e-mail.



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Application for withdrawal from the long-term section of the Salary Indemnity Plan

Name _____ SIN _____

Birth date _____ School district _____ Local association _____
(year/month/day)

Home address _____

City _____ Postal code _____ Home phone no. _____

Regulation 1.3

A member who has attained age 64, has reached the *Factor 88*, or, is in receipt of a retirement pension under a registered pension plan, may voluntarily withdraw from the long term section of the plan. Withdrawal may be made during any school year in which one of the foregoing conditions has been met and upon the completion of the appropriate withdrawal form (obtained from the plan administrator). Withdrawal will be effective, upon approval, in September for applications submitted in that month, and applications submitted later will be effective the month following approval of the application.

I wish to voluntarily withdraw from the long-term section of the Salary Indemnity Plan based on one of the following:

- I am 64 years old, as of _____ I have reached *Factor 88*
- I am in receipt of a retirement pension under a registered pension plan.

I understand that if I voluntarily withdraw from the SIP: Long-term, I will no longer be required to make contributions and I hereby release the BCTF SIP: Long-term, their officers, employees, and agents from any obligation for further claim or demand for monetary loss, or any further relief whatsoever under the BCTF SIP: Long-term plan. I consent to the BC Pension Corporation disclosing personal information about me to the BCTF respecting my participation in the Teachers' Pension Plan, including employer-reported information respecting service and salary. I understand that this information will be disclosed to the BCTF to allow the BCTF to assist determining eligibility for Salary Indemnity Plan: Long-term benefits or withdrawal from Salary Indemnity Plan: Long-term contributions. I understand that my contributory service in another teachers' pension plan is fully recognized by the Salary Indemnity Plan but if transferred to the BC Teachers' Pension Plan may be prorated.

Signature _____

Date _____

Note: The Plan requires a signed original application

Send to Salary Indemnity Plan, BCTF and enclose copies of:

1. birth certificate or government identification for proof of age
2. proof of contributory service in BC, such as a *Teachers' Pension Plan Member's Benefit Statement*
3. proof of contributory service in a province with a reciprocal agreement, if applicable, or
4. proof of benefits from a registered pension plan, if applicable.

Date received by BCTF Income Security

For office use only (Attach copy of calculation formula.)			
Approved: _____	Denied: _____	Date: _____	
Effective date of withdrawal: _____	Signature: _____		
Existing file: _____	File stamped: _____		
(previous claims, rehab., etc.)	(or microfiche update)		