

Complete this form to designate who will receive any pension benefits that may be payable after your death.

### **Section 1: Member information**

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First name	Last name	Employee badge no./ Pensioner no.
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	Apartment or suite no.	
<input type="text"/>	<input type="text"/>	
City/Town	Province	Postal code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone number	Email address (personal)	
<input type="text"/>	<input type="text"/>	

### **Section 2: Spousal status**

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If you have a spouse when your pension starts or at the time of your death (whichever happens first), they are legally entitled to receive at least 60% of your monthly pension for their lifetime after your death, unless they choose to waive that right.

**Note:** Only the person who is your spouse at retirement is eligible to receive a survivor pension. If you marry or become common-law after your pension has started, this spouse is not entitled to a survivor pension.

For pension purposes, a **spouse** is someone you are either:

- Married to and not living separate and apart from, or
- Not married to, but you've been living together in a conjugal relationship for at least three years, or a shorter period if you're in a relationship of some permanence and you're the parents of a child (as defined by law)

**Do you have a spouse at the time of completing this form?**  Yes  No

Spouse's first name	Spouse's last name	Spouse's date of birth (YYYY-MM-DD)
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Section 3: Designate a beneficiary

### If you have a spouse:

- Your spouse (at the earlier of your pension start date or the time of your death) is automatically the sole beneficiary of your pension. They are entitled to a survivor pension over any named beneficiaries. You don't need to name your spouse as a beneficiary for them to receive a survivor pension.
- Any designations you enter below would only take effect if you no longer have a spouse when your pension starts or at the time of your death (e.g., your spouse predeceases you, you and your spouse separate) or if your spouse chooses to waive their right to a survivor pension.

### If you don't have a spouse:

- You can name any person or your estate as your pension beneficiary.

By completing this form, you are cancelling and replacing any previous beneficiary designations you made.

#### Beneficiary 1

Name (first and last)

Relationship to you

Date of birth  
(YYYY-MM-DD)

% of benefit

Phone number

Email address

#### Beneficiary 2

Name (first and last)

Relationship to you

Date of birth  
(YYYY-MM-DD)

% of benefit

Phone number

Email address

#### Beneficiary 3

Name (first and last)

Relationship to you

Date of birth  
(YYYY-MM-DD)

% of benefit

Phone number

Email address

Attach additional pages as required.

### Notes

- If you designate more than one beneficiary, the total percentage allocated must equal 100%. If you don't specify percentages, any benefit will be divided equally among your beneficiaries.
- If one beneficiary dies, their share will be distributed among the remaining beneficiary(ies). If all beneficiaries die before you, the benefit will be paid to your estate.
- If you are considering designating a minor or someone who does not have capacity to deal with their affairs, it is recommended that you consult a lawyer, as a trustee may need to be appointed to manage the benefit on their behalf.

## Section 4: Agreement and signature

### I understand, agree and certify that:

1. The information I provided in this form is accurate and true.
2. All designations and any benefits payable to my spouse or beneficiaries are subject to TTC Pension Plan (TTCPP) Bylaws. To change or cancel these designations, I will need to complete a new *Beneficiary Designation* form.
3. TTCPP will contact me by email from time to time solely for the purpose of communicating about my pension. These communications will not contain confidential information. By providing my email address, I consent to such communications. If I don't want to receive communications by email, I will advise TTCPP prior to signing this form.

Member signature

**X**

Date (YYYY-MM-DD)

#### Submit your completed form

Secure email  
[ttcpp.ca/secure](http://ttcpp.ca/secure)

Mail  
TTC Pension Plan  
2 Bloor Street East, Suite 1901  
PO Box 79, Toronto ON M4W 1A8

#### Questions?

We're always here to help

1-800-663-6820  
Monday to Friday, 8 a.m. to 4 p.m., ET  
[membercare@ttcpp.ca](mailto:membercare@ttcpp.ca)  
[ttcpp.ca](http://ttcpp.ca)

#### Accessible formats

Accessible formats are available upon request. Let us know your preferred format so we can best meet your needs.

Toronto Transit Commission Pension Fund Society – CRA and FSRA registration no. 0317586

#### Notice of collection of personal information

Personal information on this form is collected under the authority of the *Corporations Act (1990)* and will be used only to administer pension benefits. For questions about this collection, contact TTC Pension Plan Member Services at 1-800-663-6820 or [membercare@ttcpp.ca](mailto:membercare@ttcpp.ca).