

Children's Pension Application

Instructions:

Complete and sign this form to notify the CAAT Pension Plan of the death of a retired member, and to start the children's survivor pension.

In order to begin payment of the children's survivor pension, we require the following documentation:

- A legible photocopy of the Death Certificate or Funeral Director's Statement of Death.
- A cheque marked "void." This is the account into which the pension will be paid.
- Proof of age for each child.

Acceptable proof of age includes any government-issued identification that clearly shows the bearer's date of birth (e.g. valid passport, birth certificate, citizenship card, driver's license, etc.), excluding health cards.

Mail the completed form, with required documentation attached to the CAAT Pension Plan at the address below. If you have any questions, please contact our office by email at member@caatpension.ca or by telephone at 416-673-9000 or toll free at 1-866-350-2228.

Definition of eligible child: eligible child shall mean a member's biological or adopted child, who at the time of the retired member's death was dependent on the member and was either under the age 18, or under the age 25 and a full-time student, or an adult disabled child who is unable to support themselves as a result of a disability, provided they became disabled before the age of 18, or before the age of 25 if they were a full-time student.

Note: Date format is dd-mmm-yyyy for all date fields.

A Deceased Retired Member Identification - Complete for all cases					
Last Name	First Na	First Name		Social Insurance Number	
Mailing Address					
Date of Death Sex M F					
B Eligible Children's Identification - Complete for all cases					
Last Name of Child		First Name & Middle Initial			Date of Birth
Molling Address			Talan	hana	
Mailing Address			Telep	none	
C Legal Guardian or Adult Child Identification - Complete for all cases					
The children's pension must be paid to the legal guardian of the child as long as the child is a minor (e.g., under 18). I, the undersigned, certify that I am the Legal Guardian of the child(ren) named above, who is/are the dependent child(ren), as defined above, of the deceased retired member for the purposes of the CAAT Pension Plan. On behalf of the child(ren), I hereby request payment of the deceased's pension entitlement.					
Or					
I, the undersigned, certify that I am the dependent adult eligible child, as defined above, of the deceased retired member for the purposes of the CAAT Pension Plan. I hereby request payment of the deceased's pension entitlement.					
I authorize the CAAT Pension Plan and its agents to collect, share and use my personal information and the child(ren)'s personal information as may be needed for the purposes of calculating and paying pension benefits and activities related to the administration of the Plan. Personal information is collected, used and maintained by the Plan in accordance with its privacy policy available at www.caatpension.ca .					
Last Name of Legal Guardian or Adult Child	First Na	me	Initial		
D Signature					
Signature of Legal Guardian or Adult Child Dat					Date