

## Instructions

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

In order to begin payment of the spousal survivor pension, we require the following documentation:

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

**Mail the completed form, with required documentation attached to the CAAT Pension Plan at the address below. Contact Member Services at [member@caatpension.on.ca](mailto:member@caatpension.on.ca) or 416.673.9000 or 1.866.350.2228 (toll-free) if you have questions.**

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

### A Deceased Retired Member Identification - complete for all cases

Last Name	First Name	Initial	Social Insurance Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mailing Address

Date of Death (dd-mmm-yyyy)  Sex  M  F

### B Spousal Information and Declaration - the spouse of the deceased member completes this section

Your spouse is the person to whom you are legally married or in a common-law relationship. Common-law, for the purposes of the CAAT Pension Plan means a couple that has been living together for at least three years (or less if the couple has children).

Last Name of Spouse	First Name	Initial	Social Insurance Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mailing Address (if different from above)

Spouse's Date of Birth (dd-mmm-yyyy)  Sex  M  F Date of Marriage/Start of Common-Law (dd-mmm-yyyy)

I, the undersigned, declare that I am the lawful or qualifying common-law spouse of the retired member for the purposes of the CAAT Pension Plan (as defined in the Plan text), that we were married or had been living in a common-law relationship since the date shown above, and that I choose to receive a pension to start on the first day of the month following the month in which the Retired Member died.

I authorize the CAAT Pension Plan and its agents to collect, share and use my 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.on.ca](http://www.caatpension.on.ca).

*Note: Where the member, former member or retired member has had a previous spouse, a divorce or separation agreement could have an impact on the survivor benefit paid. Contact the CAAT Pension Plan if you have any questions.*

\_\_\_\_\_  
Spouse signature

\_\_\_\_\_  
Date