

**REQUEST FOR INFORMATION**  
for Employee Anticipating Retirement

**PLEASE PRINT ALL INFORMATION**

For the best and most timely results, please submit this form 60 days in advance  
of your anticipated date of separation from employment to **Human Resources**.

PLEASE SELECT ONE (1) OF THE FOLLOWING. **DO NOT** check both boxes if you are a DB plan participant who also has a supplemental 401k.

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**I am a Defined Benefit (DB) Plan Participant**

Employee's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ SS# \_\_\_\_-\_\_\_\_-\_\_\_\_

Spouse's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ SS# \_\_\_\_-\_\_\_\_-\_\_\_\_

☐

**I am a Defined Contribution (401k) Plan Participant**

I, \_\_\_\_\_, am submitting this request in preparation for my anticipated retirement on \_\_\_\_\_. By submitting this form, I am seeking information to confirm my eligibility to retire. This request, the first step in my inquiry, is to be submitted to the Human Resource office. Upon confirmation of my eligibility to qualify for retirement (typically confirmed within 7-10 days), Human Resources will contact me to schedule an "in person" meeting to discuss:

- My options with respect to post retirement benefits, and if a DB plan participant,
- Confirmation of my retirement date with the Finance Department and to clarify whether an updated pension estimate is needed prior to the final actuary calculation.

As is customary, I understand that Payroll, a Division of the Finance Department, upon my separation from employment, will calculate all of my accumulated banked time for which I am eligible to receive in accordance with the controlling agreement related to my employment with the City. Such bank time payouts **will occur** no earlier than the first payroll period following the payroll period during which my employment terminates.

Employee Signature:

Today's Date:

\_\_\_\_\_

\_\_\_\_\_

Received in Human Resources by:

Date Received:

\_\_\_\_\_

\_\_\_\_\_

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***For Human Resources Use Only***

Date of Hire: \_\_\_\_\_

Years of Service to Date: \_\_\_\_\_

Age: \_\_\_\_\_

Union Contract: \_\_\_\_\_

Eligibility Date: \_\_\_\_\_

Retirement Provision: \_\_\_\_\_