

PAST SERVICE PENSION BUY-BACK

Name : _____ Employee No : _____

BUY-BACK PERIOD(S)

1. From : ____/____/____ To : ____/____/____ ____ year(s) ____ month(s)
 day month year day month year
2. From : ____/____/____ To : ____/____/____ ____ year(s) ____ month(s)
 day month year day month year
3. From : ____/____/____ To : ____/____/____ ____ year(s) ____ month(s)
 day month year day month year

PAYMENT METHOD

RRSP RRSP transfer (decrease the PSPA for service after December 31, 1989)
(T2033 form required) \$ _____

VOLUNTARY Voluntary contributions paid with interest
as at (_____) \$ _____

DOWN PAYMENT Employee lump sum payment
(Cheque made payable to the University of Ottawa) \$ _____

AMORTISATION PERIOD: _____ year(s)

DEDUCTION PERIOD:

From : ____/____/____ To : ____/____/____
 day month year day month year

AMOUNT PER PAY: \$ _____ **TOTAL AMORTIZED:** \$ _____
(Including interest at 6.25%)

(Deduction # _____)

PAST SERVICE PENSION ADJUSTMENT (POST – 1989 SERVICE)

If I decide to re-purchase this service, I authorize the University of Ottawa to request a past service pension adjustment "PSPA" with the Canada Revenue Agency for the adjusted period from _____ to _____. The Canada Revenue Agency will approve the request only if I have enough cumulative registered retirement savings room in order to absorb the past-service pension adjustment in the amount of \$ _____

COMMENTS

SIGNATURE (Your signature is required)

The changes to the amortized buy-back contract must be done at the anniversary date and any lumps sum payment must be at least 10% of the total cost of the buy-back. I authorized the University of Ottawa to subtract from my pay the necessary deduction according to the amortized contract. I declare that I have completed the present form with full knowledge of all facts and after having received all necessary information.

Employee signature _____ Date _____