



New York City Police Pension Fund

233 Broadway, 25th Fl.

New York, NY 10279

(212) 693-5100

Subject: Instructions for Transferring Board of Education Retirement System (BERS) Membership to the NYC Police Pension Fund (NYCPPF)

➔ IMPORTANT! If your BERS membership date is before July 1, 2009, call the NYCPPF Membership Services Unit at (212) 693-5850 BEFORE filling out the *BERS Transfer Application*. If your BERS membership date is after July 1, 2009, complete the *BERS Transfer Application* – no need to call first.

- Enter all applicable information from “First name” through “Department/School/District.” In the “New Retirement System” section, check “Other” and enter “NYC Police Pension Fund (NYCPPF).”
- Enter your NYCPPF Tax ID # as the “New Membership Identification Number.”
- Sign and date the form, have it notarized, and mail it to:

NYC Police Pension Fund
233 Broadway, 25th Fl.
New York, NY 10279-2501

You may also deliver the completed, notarized form to NYCPPF at 233 Broadway, 19th floor (ID required). NYCPPF will certify the application and forward it to BERS. If all legal requirements have been met, your transfer will be effective on the date BERS receives the application.

- **You have a maximum period of one (1) year in which to transfer BERS time to NYCPPF.** This period begins on the date you separated from BERS.
- If you have transfer-related questions, contact BERS at (718) 935-5400 (if out of state, call 800-843-5575). You may also call NYCPPF Membership Services at (212) 693-5850.

G

Grid for identification number

BOARD OF EDUCATION RETIREMENT SYSTEM
OF THE CITY OF NEW YORK
65 COURT STREET
BROOKLYN, NEW YORK 11201-4965

TRANSFER APPLICATION

First Name MI Last Name

XXX-XX- SSN Last 4 Digits Employee Identification Number

Address Apt. No.

City State Zip Code

Work Telephone Number Home Telephone Number

OFFICIAL DATE OF RECEIPT

Current Job Title Department / School / District

NEW RETIREMENT SYSTEM

I wish to transfer my membership and Tax Deferred Annuity (TDA; if applicable) to the retirement system as indicated by my selection:

- Checkboxes for retirement systems: New York City Teacher's Retirement System (NYCTRS), New York City Employee's Retirement System (NYCERS), New York State Teacher's Retirement System (NYSTRS), New York State & Local Employee's Retirement System (NYSLERS), Other.

NEW MEMBERSHIP NUMBER

New Membership Identification Number

We require the membership identification number assigned to you by your new retirement system in order to process this application. You must have an established membership with the retirement system that you selected before submitting this application.

ACKNOWLEDGEMENT

I hereby apply to transfer my membership, and accumulated contributions, if any, credited to me from the Board of Education Retirement System pursuant to section 43 of the Retirement and Social Security Law. Further, I hereby claim any and all previous service credit to which I am entitled.

Signature: Date:

STATE OF

COUNTY OF

On this day of, personally appeared before me the said, to me known to be the individual described in and who executed the foregoing document, and he (she) duly acknowledged to me that he (she) executed the same, and the statements contained therein are true.



TRANSFER APPLICATION

TO BE COMPLETED BY SYSTEM TO WHICH TRANSFER IS REQUESTED

Please verify that the applicant is a member of your Retirement System by completing all of the below information.

_____	XXX - XX - _____
Name of Member	SSN Last 4 Digits
_____	_____
Name of Retirement System	Membership Identification Numbe
_____	_____
Name of Office	Title
Signature: _____	Date: ____/____/_____

BERS OFFICIAL USE ONLY

Transferring Member Status:

- | | | | |
|---|--|---------------------------------|---|
| <input type="checkbox"/> Tier 1 | <input type="checkbox"/> Plan A | <input type="checkbox"/> Plan B | <input type="checkbox"/> Tier 4 - 55/25 (19) 2008 |
| <input type="checkbox"/> Tier 2 | <input type="checkbox"/> Plan C | <input type="checkbox"/> Plan D | <input type="checkbox"/> Tier 4 - 55/27 (19) 2008 |
| <input type="checkbox"/> Tier 2 - 55/25 (96) 1995 | <input type="checkbox"/> Physically Taxing | | <input type="checkbox"/> Tier 4 - 50/25A (560) 2001 |
| <input type="checkbox"/> Tier 2 - 55/25 (19) 2008 | | | <input type="checkbox"/> Tier 4 - 25/Out SSO (617) 2002 |
| <input type="checkbox"/> Tier 2 - 55/Out SSO (617) 2002 | | | <input type="checkbox"/> Tier 4 - 55/27 (504) 2009 |
| <input type="checkbox"/> Tier 3 - Age 62 | | | <input type="checkbox"/> Tier 6 - Age 63 |
| <input type="checkbox"/> Tier 4 - Age 62 | | | <input type="checkbox"/> Tier 6 - 5/Out SSO (617) 2002 |
| <input type="checkbox"/> Tier 4 - 55/25 (96) 1995 | <input type="checkbox"/> Physically Taxing | | <input type="checkbox"/> Tier 6 - 50/25A (560) 2001 |
| <input type="checkbox"/> Tier 4 - 57/5 (96) 1995 | <input type="checkbox"/> Physically Taxing | | |