



Confirmation of eligible service for firefighters

Use this form to confirm that a firefighter is other-than-continuous full-time (OTCFT) and has eligible service in the OMERS Plan.

Once OMERS receives confirmation of eligible service, the member will automatically receive a buy-back cost for the eligible service period(s).

All firefighters who are OTCFT and meet the minimum requirements listed in OMERS legislation must be given the opportunity to enrol in the OMERS Plan. For more information, see Section "6.1 Other-than-continuous full-time (OTCFT) enrolment" in the online OMERS Employer Administration Manual.

Send the completed and signed form to OMERS by mail or fax. If you fax it, do not also mail the original.

Personal information is collected for pension administration purposes by OMERS under the authority of Section 35 of the *OMERS Act, 2006*. OMERS does not share personal information with any other person other than for purposes of pension plan administration, and, the provision of personal information is considered consent to its use for those purposes. The collection, use, retention and destruction of personal information are subject to our Privacy Policy at www.omers.com.

Any questions regarding the collection of personal information should be directed to OMERS Client Services at 1-800-387-0813.

1. MEMBER INFORMATION

Group number		OMERS membership number			
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other:		Last name	First name	Middle name	
Address (street number and name)			City	Province	Postal code
Daytime telephone ()					

2. SERVICE INFORMATION

Please enter all service periods from the date of hire.

Volunteer	Date service started (m/d/y)	Date service ended (m/d/y)	Date service started (m/d/y)	Date service ended (m/d/y)
OTCFT	Date service started (m/d/y)	Date service ended (m/d/y)	Date service started (m/d/y)	Date service ended (m/d/y)

% worked (if not continuous full-time during this period)

Eligible service reflecting a member's hire to enrolment date will be added to their record. A package will be sent to the member describing how to convert eligible service to credited service. Purchasing eligible service will increase a member's pension.

Current annual salary rate \$

Note: Keep your personal information private; do not send this form to your former employer if the current annual salary rate has been verified.

3. EMPLOYER AUTHORIZATION

You certify that your organization employs (or has employed in the past) OTCFT firefighters. These firefighters were treated as part-time employees and not as volunteers under all other applicable legislation, such as the *Income Tax Act (Canada)*, the *Employment Standards Act (Ontario)*, *Workplace Safety and Insurance Act*, and *Canada Pension Plan*. Some common indicators of part-time status are vacation pay, CPP and EI deductions from earnings, and payment of earnings on a regular basis.

Employer name		Contact (please print)	Title
Telephone number ()	Fax number ()	By providing my email address below, I authorize OMERS to contact me by email to clarify information about this member.	
Signature of authorized signing officer		Date (m/d/y)	Email



Phone
416-369-2444
1-800-387-0813



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416-369-9704
1-877-369-9704



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