

MTA DEFINED BENEFIT PENSION PLAN

APPLICATION TO RECEIVE CREDITED SERVICE FOR VESTED PRIOR SERVICE

The Plan has special rules concerning Prior Vested Service with a New York State or City Retirement System or a Pension Plan of an MTA Agency. In general, the Plan recognizes credit for Prior Vested Service only to determine if you are eligible for a benefit under the Plan but not to determine the amount of your benefit. However, under the following specified conditions, the Plan will recognize your Prior Vested Service to determine the amount of your benefit: (1) you must have completed 3 years of credited service with the Plan; (2) if the benefit on account of your Prior Vested Service becomes payable by your prior plan or retirement system, you must defer payment until after you retire or otherwise terminate your membership in the Plan; and (3) any benefit payable by this Plan will be offset by 100% of the benefit payable on account of your Prior Vested Service by the prior plan or plans.

1. Your Name (First, Middle Initial, Last)		5. Last 4 of Social Security Number	
2. Address		6. Employee I.D.	9. BSC I.D.
Street _____ Apt No. _____		7. Date of Birth	
City _____ State _____ Zip Code _____		Month _____	Day _____ Year _____
3. Phone Number _____	4. Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	8. Job Title _____	
10. E-Mail Address _____			

I hereby elect to purchase/receive credited service for my Prior Vested Service with _____, as listed below.
(Retirement System or Pension Plan)

Registration/Member number in former System/Plan, if known: _____

Please provide us with the dates of the Prior Vested Service and prior employer(s)

Prior Vested Service : From _____ to _____ Name of Dept./ Agency: _____

From _____ to _____ Name of Dept./ Agency: _____

Are you eligible to receive a benefit on account of your Prior Vested Service? Yes No

Are you receiving a benefit on account of your Prior Vested Service? Yes No If Yes, how much per month? _____

****You must submit your most recent retirement systems statement for application completion****

I hereby certify that the above information is correct to the best of my knowledge.

Signed: _____ Date: _____

Listed below are the names of three New York State retirement systems, five New York City systems and three MTA Agency Plans:

New York State and Local Employees' Retirement System	New York City Teachers' Retirement System
New York State and Local Police and Fire Retirement System	NY City Board of Education Retirement System
New York State Teachers' Retirement System	New York City Police Dept. Pension Fund Subchapter 2
New York City Employees' Retirement System	New York City Fire Dept. Pension Fund Subchapter 2
Manhattan and Bronx Surface Transit Operating Authority (MaBSTOA) Pension	Staten Island Rapid Transit Operating Authority (SiRTOA) Pension Plan
Long Island Rail Road Company Pension Plans	