



# Long Island Rail Road

Pension Office  
Jamaica Station - #1955  
Jamaica, NY 11435  
(718) 558-8130

## APPLICATION FOR PENSION Long Island Rail Road Company Pension Plans (for Employees Hired Prior to January 1, 1988)

**Attention:** Read the instructions on page two. Incomplete information will delay your pension authorization.

1. Name (Last, First, Initial)			2. Date of Birth			3. Department			4. Union		
Address:			5. Job Title			6. Employment Date			7. Employee No.		
Zip:			Telephone No.			8. Social Security Number					
9. Type of Pension Requested: (check one only) <input type="checkbox"/> Service Age <input type="checkbox"/> Disability			10. I understand I am retiring: <input type="checkbox"/> Without a Survivorship Option <input type="checkbox"/> With Survivorship Option A <input type="checkbox"/> With Survivorship Option A-1 <input type="checkbox"/> With Survivorship Option B <input type="checkbox"/> With Survivorship Option B-1						11. Requested Pension Effective Date:		
									Month	Day	Year
										1st	
12. If currently D/S, last eligible day for sick pay						13. Last day of Active Work					
Month	Day	Year				Month	Day	Year			
14. Are you eligible for Social Security Benefits? If yes, you must apply for Social Security Benefits at age 65 <input type="checkbox"/> Yes <input type="checkbox"/> No			15. Are you presently receiving an annuity under the Railroad Retirement Act? <input type="checkbox"/> Yes <input type="checkbox"/> No			16. Do you intend to apply for a disability annuity under the Railroad Retirement Act? <input type="checkbox"/> Yes <input type="checkbox"/> No					
17. Was your railroad career interrupted by Military service? <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, attach your Military Discharge Papers.						18. If yes, give dates of Military Service					
						FROM			TO		
						Month	Day	Year	Month	Day	Year
19. Did you attach document certifying date of birth? <input type="checkbox"/> Yes <input type="checkbox"/> No						20. Are you a member of the MTA Deferred Compensation Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No					
21. Do you have any previous Railroad service? If yes, give the name of the Railroad Company that you were immediately employed with prior to your employment with the LIRR: <input type="checkbox"/> Yes <input type="checkbox"/> No  Name of prior Carrier:						If yes, give dates of employment:					
						FROM			TO		
						Month	Day	Year	Month	Day	Year
If you had any previous railroad service did you file authorization to release employment data from previous railroad employer? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Pension Check Mailing Address:  Name:  Street:  City, State, Zip						23. I certify the information given on this form is correct and I have not withheld any requested data.  Signature & Date:					
						24. Notary Public State of NY/County of _____ : Sworn to before me this _____ day of _____, 20____.					
						NOTARY PUBLIC:					

**APPLICATION FOR PENSION**  
**Long Island Rail Road Company Pension Plans**  
**(for Employees Hired Prior to January 1, 1988)**

**GENERAL INSTRUCTIONS**

Answer all the questions on page one of this form to the best of your knowledge.

You are required to have an **APPLICATION FOR PENSION** on file before the requested effective date of your pension.

Your signature on this form must be notarized.

You are required to attach documents certifying date of birth.

If you have served in the U.S. Military while in railroad service, you are required to attach your Military Discharge papers.

To place this application on file, visit the Pensions Office.

If you have any questions concerning this form or retirement procedures, call (718) 558-8130. or send an e-mail to [PENSIONOFFICE@LIRR.ORG](mailto:PENSIONOFFICE@LIRR.ORG)

If you elect a survivorship option, you are required to attach documents certifying your spouse's date of birth and Social Security Number. You also must submit proof of your marriage.

When you are eligible, you must apply for your Railroad Retirement Annuity at the nearest Railroad Retirement Board Office (See your telephone directory for the office nearest you).

**PENSION OFFICE**

**MAILING ADDRESS**

Long Island Rail Road Company  
Pension Office  
Jamaica Station - #1955  
Jamaica, NY 11435

**OFFICE LOCATION**

Jamaica Central Control Building  
144-41 94<sup>th</sup> Avenue, 5<sup>th</sup> Floor  
Jamaica, NY 11435  
Phone: (718) 558-8130

As information, your Long Island Rail Road Company Pension Plan is taxable for Federal income tax purposes and may be subject to State taxes, depending on your state of residence.

ApplicationforPensionPre88112006