

CSS Pension Plan PO Box 1850, Saskatoon, SK S7K 3S2 Phone: (306) 477-8500 | Toll-free: 1-844-427-7736 E: css@csspen.com | Fax: (306) 244-1088 www.csspension.com | 🚫 in 🗅

# ONTARIO LOCK-IN TRANSFER AGREEMENT

Section A	
Whereas the undersigned Applicant has established a:	
LOCKED-IN RETIREMENT ACCOUNT (LIRA), Contract No.	
Plan Name with:	(hereinafter known as the Issuer), registered
under the Income Tax Act (Canada) and approved by the Ontario Superint	endent of Pensions to accept transfers of locked-in pension funds.
Or	
LIFE INCOME FUND (LIF), Contract No.	
Plan Name with:	(hereinafter known as the Issuer), registered
under the Income Tax Act (Canada) and approved by the Ontario Superint	endent of Pensions to accept transfers of locked-in pension funds.
	e full amount of funds transferred by the Co-operative Superannuation Society are earnings on such funds, will be deposited to the above mentioned LIRA or provisions and requirements of the <i>Ontario Pension Benefits Act</i> , and the
By signing this Agreement and on finalization of the requested transfer, the his/her beneficiary or estate from the Co-operative Superannuation Society Superannuation Society Pension Plan. The Issuer assumes all responsibilities regulations for failure to comply with the provisions of the Act.	
If the Applicant is applying for a transfer to a LIF the Applican	certifies that he/she: has a "spouse"
	does not have a "spouse"
within the meaning of the Pension Benefits Act of Ontario. (Se	
within the meaning of the Pension Benefits Act of Ontario. (Se	
within the meaning of the <i>Pension Benefits Act of Ontario</i> . (Se Section B	
Section B	ee reverse)
Signed by applicant	signed by witness
Signed by applicant	Signed by witness Social Insurance Number or Member ID
Signed by applicant Applicant's name (printed)	Signed by witness Social Insurance Number or Member ID
Section B Signed by applicant Applicant's name (printed) Completed on behalf of financial instituition issuing the above	signed by witness Social Insurance Number or Member ID LIRA or LIF:
Signed by applicant Applicant's name (printed) Completed on behalf of financial instituition issuing the above Name of issuer	signed by witness Social Insurance Number or Member ID LIRA or LIF:
Signed by applicant          Applicant's name (printed)         Completed on behalf of financial instituition issuing the above         Name of issuer         Signed on behalf of Issuer:	Signed by witness Social Insurance Number or Member ID LIRA or LIF: Issuer address
Section B Signed by applicant Applicant's name (printed) Completed on behalf of financial instituition issuing the above Name of issuer Signed on behalf of Issuer: Print complete name	Signed by witness Social Insurance Number or Member ID LIRA or LIF: Issuer address
Section B         Signed by applicant         Applicant's name (printed)         Completed on behalf of financial instituition issuing the above         Name of issuer         Signed on behalf of Issuer:         Print complete name         Date signed	Signed by witness Social Insurance Number or Member ID LIRA or LIF: Issuer address

### Section C

The amount transferred to the LIRA or LIF by the Co-operative Superannuation Society Pension Plan pursuant to this lock-in agreement is:

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#### **Co-operative Superannuation Society Pension Plan**

Signature

(dd/mmm/yyyy)

#### Notes:

This Agreement must be accompanied by a properly completed Form T2151(E), and in the case of a LIF a completed Spouse's Consent to Transfer of a Life Income Fund (LIF) Form starting on page 3 of this agreement.

In accordance with the provisions of the Co-operative Superannuation Society Pension Plan, payments under a life annuity or other retirement income arrangement may commence at the earliest of the Applicant's 50th birthday, or the date when the Applicant's age at time of terminating employment with employers participating in the Co-operative Superannuation Society Pension Plan, plus completed years of service with employers participating in the Co-operative Superannuation Society Pension Plan equals or exceeds the sum of 75 years.

#### **Defintions:**

"Spouse" -except where otherwise indicated in the Ontario Pension Benefits Act, either of two persons (i) are married to each other, or (ii) are not married to each o

- are not married to each other and are living together in a conjugal relationship:
- (a) continuously for a period of not less than three years, or
- (b) in a relationship of some permanence, if they are the parents of a child as set out in section 4 of the Children's Law Reform Act.

To be completed by the Member's Spouse if the Member is requesting a transfer of funds to a Life Income Fund (LIF)

## Spouse's Consent to a Transfer to a Life Income Fund (LIF)

who has requested a transfer of locked-in money from the Co-operative Superannuation Society (CSS) Pension Plan. Once transferred, such locked-in money remains subject to the provisions of the ON PBA and its supporting regulations.

I am aware that the administrator of the CSS Pension Plan may not comply with a request to transfer locked-in money to a LIF unless the written consent of the spouse is obtained.

I am aware that there is no requirement under the ON PBA and its supporting regulations for a spouse to provide such written consent. It is solely at the option of the spouse to provide written consent.

I understand the potential implications of my consenting to this arrangement, and I have had the opportunity to obtain independent financial advice.

I understand that by providing written consent, I am not waiving my rights under the ON PBA and its supporting regulations to survivor benefits or benefits which may be available on relationship breakdown.

I understand that as the spouse of the owner of the LIF at the owner's date of death, I will be entitled to receive survivor benefits as his or her surviving spouse in accordance with the ON PBA and its supporting regulations.

I certify that my spouse and I are not living separate and apart. I hereby consent to the transfer of my spouse's locked-in money from the CSS Pension Plan to a LIF.

Dated at	in the Province or Territory of	this	day of	,
			(month)	(year)
Spouse's signature: x				
Spouse's address:				
Witness' signature: x				
Witness' name:				
Witness' address:				

Prior to completing this form, a spouse should consider obtaining independent legal and financial advice concerning individual rights and the effect of consent.

Definition:

Ontario Benefits Act, Section 1:

"spouse" means, except where otherwise indicated in this Act, either of two persons who,

(a) are married to each other, or

(b) are not married to each other and are living together in a conjugal relationship,

- (i) continuously for a period of not less than three years, or
- (ii) in a relationship of some permanence, if they are the parents of a child as set out in section 4 of the Children's Law Reform Act.