

FORM P3 (Division of Pensions Regulation, s.4 (c))
**REQUEST FOR TRANSFER FROM
DEFINED CONTRIBUTION ACCOUNT**

When to Use this Form

A *Form P3* is used when

- there is an agreement or order dividing the benefits,
- the benefits are in a defined contribution account, and
- the spouse wants the spouse's proportionate share transferred to another plan (such as an RRSP).

[Please print]

To: Administrator of plan

Name of plan WorkSafeBC Pension Plan
Address of administrator PO Box 9460
Victoria BC V8W 9V8

From: Spouse of member *[Note: "spouse" includes a person who has lived in a marriage-like relationship with the member for a continuous period of at least two years and also includes a former spouse.]*

Name of spouse _____
Address _____
Email address _____
Telephone (home) _____ (work) _____
Social Insurance Number _____

[The administrator will use this information to contact you about important matters. Make sure it is accurate and that you promptly advise the administrator of any changes.]

In relation to: Plan member

Name of member _____
Address _____
Email address _____
Telephone (home) _____ (work) _____
Social Insurance or Pension Plan Identity Number _____
Employer _____

Other requirements:

A copy of the agreement or order dividing the benefits must be provided. *[Please attach or enclose the agreement or order with this Form].*

An administrator is entitled to charge a fee to transfer the benefits from the defined contribution account of \$175.

Request:

I request that you

- (a) transfer my proportionate share of the member's defined contribution account from the plan in accordance with the *Family Law Act* and the *Pension Benefits Standards Act*, and
- (b) advise me in writing of the information that you require in order to do this.

Signed (*spouse*) _____

Date _____

Signed (*witness to signature of spouse*) _____

Name of witness _____

Address of witness _____
