



Northern California Tile Industry Trust Funds

Health & Welfare • Vacation & Holiday • Defined Benefit Pension • Defined Contribution Pension

VACATION PLAN WITHDRAWAL REQUEST FORM

I would like to withdraw the entire balance currently in my vacation account.

I would like to transfer my entire balance to my Operating Engineers Federal Credit Union account.

Member's Name

Social Security No.

Street Address

City, State, Zip

Phone Number

Signature

Date

TO SUBMIT VIA FAX:

Please fax to the Trust Fund Office Contributions Department: 925-362-8749

7180 Koll Center Parkway, Suite 200 Pleasanton, CA 94566

P.O. Box 1607 San Ramon, CA 94583

Phone 925.208.9995 • Toll Free 888.208.0250 • Facsimile 925.462-0108

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