1. Read each question carefully and answer all applicable questions.

2. Print all information.

3. BE SURE TO DATE AND SIGN THE APPLICATION.

4. Make certain that you attach sufficient evidence of your date of birth. You must also attach evidence of your spouse's date of birth and a copy of your marriage license/certificate if you wish to consider the Participant-and-Spouse Pension.

5. If you were divorced, please provide final divorce decrees and/or Qualified Domestic Relations Orders.

6. Refer to your Pension Fund Summary Plan Description for the explanation of the difference between the various pensions.

7. BE SURE TO SIGN THE CERTIFICATIONS AND DECLARATIONS.

8. Mail your completed application and all required documents to:

   Intermountain Ironworkers Pension Plan
   Post Office Box 30580
   Salt Lake City, UT 84130

   Or Email to: Staff@iiwBenefits.org

After you submit a pension application, the Benefit Office will acknowledge receipt and will review it for completeness. If the application is incomplete, you will be notified with a written request for additional information. The Benefit Office will finalize your application within thirty (30) days of receiving all required documentation. You may check your application status by contacting the Benefit Office at (888) 867-9510. The expected processing time is typically 30 - 90 days.

Please note that applying for retirement benefits from the Plan is a two-step process. Completing and submitting the enclosed application is only the first step. After your application is received and approved, you will then be provided a benefit election packet containing certain legally required notices and the forms necessary for you to choose the form of payment for your pension benefits, make tax withholding elections, and arrange for direct deposit of your pension benefits. Your benefit payments cannot begin until after you have completed and submitted all required forms and any other documentation described in your benefit election packet.

The following documents **must** be submitted with your application for benefits. You do not have to furnish the original of any of these documents; you may submit photocopies.

- State Birth Certificate for you and your spouse (see below for alternative documents)
- Marriage Certificate with State Seal
- Copy of current driver's license or current state I.D. (with photo) for you and your spouse
- If you have ever been divorced or legally separated, please submit a complete copy of your Judgment(s) of Divorce and Qualified Domestic Relations Orders (including Separation Agreements, Property Settlement Agreements and any similar or related orders with any attachments)
- If you ever served in the military or other uniformed services of the United States, please submit copies of your induction and discharge papers and the Credit for Uniformed Service for the United States Form (for a copy of this Form, contact the administrative office)

PROOF OF AGE

In order to be eligible for retirement benefits, you are required to provide proof of age. The following is a list of documents that may serve as proof of age. The acceptable proofs of your date of birth are listed below in two groups. Submit a copy of one of the proofs listed in Group I. If you cannot submit proof from Group I, submit copies of two of the proofs listed in Group II.

GROUP I:

1. A birth or baptismal certificate.
2. A signed statement by the Physician or midwife who was in attendance at birth.
3. Notification of registration of birth in a public registry of vital statistics.
4. Certification of record of age by the US Census Bureau.
5. A foreign government record.
6. Naturalization record.
7. Immigration papers.
8. Hospital birth record certified by a custodian of such record.

GROUP II:

1. Military record.
2. Passport.
3. School record certified by the custodian of such record.
4. An insurance policy which shows the age or date of birth.
5. Marriage records showing date of birth.
6. Letter from Social Security showing date of birth.
7. Vaccination record certified by the custodian of such record.
8. Other evidence, such as signed statements from persons who have knowledge of the date of birth.

Please read this application carefully before answering any questions. Please print or type your answers to all questions that may apply to you. If any questions on the application are unclear, please contact the Fund Office for assistance. After completing this application, be sure to sign your name and date the application. ***The Fund Administrator recommends that you apply for pension benefits at least 90 days prior to the date you want your pension payments to commence.***

1. Name: _____
Last First Middle

2. Address: _____
Number & Street City & State Zip Code

3. Telephone No.:_____ 4. Email: _____

5. Social Security No.: _____ 6. Date of Birth: _____

6a. Last Date of Employment: _____ b. Requested Pension Effective Date: _____

7. Are you currently married? ❒ Yes ❒ No (attach marriage certificates)

If yes, answer the following questions:

a. Spouse Name: _____

b. Social Security No.: _____ Date of Birth: _____

c. Date of Marriage: _____

d. Have you ever been divorced? ❒ Yes ❒ No

If yes, please provide Certified Copy of Divorce Decree / Settlement Agreements for all prior marriages. This includes those prior to your service with the Intermountain Ironworkers' Trust Funds.

e. Is there a Domestic Relations Order (DRO) pending qualification or a Qualified Domestic Relations Order (QDRO) on file which assigns some or all of your benefits to an Alternate Payee(s)?

❒ Yes ❒ No If yes, please provide Certified Copies

8. Are you still working in Covered Employment in the jurisdiction of the Fund?

❒ Yes ❒ No If yes, go to 8(d). If no, answer 8(a), 8(b) and 8(c).

a. Date last worked as an Ironworker: _____
Month Day Year

b. Name of employer and job location: _____

c. Describe current employment, if any: _____

d. Present employer, job description, and job location: _____

_____

_____

9. List the period of your union membership in the intermountain Ironworkers Locals:

Local Union #: _____ From: _____ To: _____

Local Union #: _____ From: _____ To: _____

Local Union #: _____ From: _____ To: _____

10. For the Local Unions in which you were a member and received pension credits in a Pension Plan other than this Plan,* list the name of the area and the Union's Local Number:

Local Union #: _____ From: _____ To: _____

Local Union #: _____ From: _____ To: _____

Local Union #: _____ From: _____ To: _____

* This information is requested because hours worked in the jurisdiction of another Ironworkers pension plan (a Related Plan) may be relevant for certain purposes in determining your pension benefits under this Plan – for example, such hours are considered in determining whether a Participant incurs a "Separation from Covered Employment." This may also be relevant information for purposes of Pro Rata Pension eligibility, as discussed below.

Under the Plan, credit for certain purposes may be provided for certain types of absences, as discussed below. If you believe either or both of these situations may apply to you, you should contact the administrative office.

Pension and Vesting Credit for Non-Working Periods of Absence. The Plan credits periods of absence from Covered Employment for which no contributions are made by an employer toward the accumulation of Vesting Credit and Pension Credit at the rate of 25 hours per week (to a maximum of 52 weeks per disability) if the absence was due to one of the following circumstances:

- Disability for the period in which Weekly Accident and Sickness Benefits were paid by the Ironworkers' Intermountain Health and Welfare Fund, or
- Disability for the period for which worker's compensation temporary disability benefits were paid, or which constituted a valid waiting period for such benefits.

No more than one full year of Vesting Credit and Pension Credit may be received under this rule over a Participant's lifetime. If you have had an absence from Covered Employment due to disability under one of the above circumstances and believe that you have not received credit in accordance with the above, please contact the administrative office. Your request must include the dates you were absent and the circumstances, and if your absence was due to disability for the period which worker's compensation temporary disability benefits were paid (or for the waiting period), you must submit proof, such as a letter from the worker's compensation carrier or program or copies of check stubs (as long as the check stubs show the dates benefits were paid).

Note that this rule *does not* provide any benefit accruals for a period of absence on or after June 1, 1982, as the benefit accrual formula subsequent to June 1, 1982 is not based on Pension Credits. However, it may be relevant if you are applying for a Service Pension or are applying for a Pension that requires a minimum number of Vesting Credits. However, the Rule of 85 Pension does not count any Pension Credits granted under the above rule.

Grace Period for Disability with respect to the Plan's Separation from Covered Employment Rule. Additionally, under the Plan's definition of "Separation from Covered Employment," a grace period due to "Disability" is provided for up to three years. Disability for this purpose has the same meaning as disease, the Participant is unable to engage in ironwork as described in the applicable collective bargaining agreement by reason of continued and indefinite duration. If you previously applied for and received an Industry Disability Pension, this grace period is applied automatically. Otherwise, you must specifically apply to have a grace period recognized. To apply, you must provide the dates of your disability and supporting documentation establishing your Disability, such as a letter from your treating physician and/or other medical evidence.

Pension Type

I am hereby applying for the following Pension under the terms of the Intermountain Ironworkers Pension Plan (Note: The last two options that are marked with an asterisk may be selected, if applicable, *in addition to* one of the other Pension options):

❒ **Regular Pension or Delayed Retirement Pension:** Must have reached your Normal Retirement Age ("NRA")(The later of age 65 or the fifth anniversary of your participation in the Plan).

❒ **Early Retirement Pension:** Must be age 55 or older, and you must have terminated employment with your employer. In addition, you must have earned at least 5 years of Vesting Service without a Permanent Break in Service, disregarding any Vesting Service earned as a result of Contiguous Non-Covered Employment (10 years of Vesting Service may be required if no covered hours since June 1, 1998).

❒ **Service Pension:** Must have earned at least 25 Pension Credits in the jurisdiction of the Intermountain Ironworkers Pension Fund without a Permanent Break in Service, and you must have terminated employment with your employer. You are ineligible for a Service Pension if contributions were first made on your behalf on or after June 1, 1996.

❒ **Rule of 85 Pension:** Your Pension Credits earned in the jurisdiction of the Intermountain Ironworkers Pension Fund (disregarding any Pension Credits earned prior to a Permanent Break in Service) plus your age on your Pension Effective Date must total at least 85. In addition, you must have at least Pension Credit in a Plan Year beginning on or after June 1, 2020 and you must have terminated employment with your employer. (Note that any Pension Credit granted for non-working period of absence is not counted for this purpose).

❒ **Pro-Rata Pension:** If you believe you may be eligible for a Pro-Rata Pension because your years of service were divided between this Plan and one or more other Ironworkers' Plans, please check this box. If you qualify for a Pro-Rata Pension, you will receive further information about this type of pension once you have submitted this Application.

❒ **Steel Fabricators, Local 606, or Local 184 Pension:*** If you have earned benefits under one of the plans that has merged into the Intermountain Ironworkers Pension Plan, you must submit a separate benefit application with respect to benefits under that plan.

❒ **Pension Enhancement Option (PEO):*** The PEO benefit is an option available to Participants who have an account balance in the Intermountain Ironworkers Tax Deferral Plan and who are eligible for distribution from that plan. A minimum of $10,000 or a maximum of ninety percent (90%) of your Tax Deferral Plan account balance may be rolled over from the Tax Deferral Plan to the Pension Plan for conversion to a monthly annuity under the PEO option. In general, you must apply for the PEO benefit at the same time you start your pension from the Intermountain Ironworkers Pension Plan, or within 12 months after your pension benefits begin. Before you elect this option, you may request an estimate from the administrative office of your monthly payments for different potential PEO rollover amounts. (If you select this option, you must complete the attached Pension Enhancement Election Form.)

I hereby apply for benefits from the Intermountain Ironworkers Pension Plan. The foregoing statements are true to the best of my knowledge and belief. I understand that a false statement may disqualify me for pension benefits and that the Board of Trustees shall have the right to recover any payments made to me because of a false statement. I further understand that if a benefit is granted to me, I agree to be bound by all the rules and regulations of the Plan.

_____ _____

Participant Signature Date

FAILURE TO COMPLETE THIS FORM FULLY, *INCLUDING SIGNING IT IN FRONT OF A NOTARY PUBLIC,* AND PROVIDING ALL DOCUMENTATION REQUESTED, WILL RESULT IN A DELAY OF THE PROCESSING OF YOUR APPLICATION. Federal law requires the Trustees to confirm whether a previous spouse is entitled to any portion of your Plan benefits. As such, it is necessary that we request the following certification and supporting documentation.

Name: _____ SSN: _____

Current marital status:

- ☐ SINGLE, NEVER MARRIED
- ☐ SINGLE, PREVIOUSLY MARRIED*
- ☐ MARRIED, NO PREVIOUS MARRIAGES
- ☐ MARRIED, WITH PREVIOUS MARRIAGE(S)*
- ☐ LEGALLY SEPARATED*

* If you have had previous marriages, please list the names of your ex-spouses, the date(s) of marriage and the date(s) of divorce (if any of your previous marriages ended due to death of your spouse at the time, please list the date of death):

Ex-spouse Name	Date of Marriage	Date of Divorce/Death

Please provide complete copies of ALL marriage certificates, divorce decrees, separation agreements, Qualified Domestic Relations Orders and any other accompanying documents related to the termination of your previous marriage(s). If any previous spouses have passed away, please provide a copy of the death certificate(s). If you do not have these documents, you should contact the appropriate court in which the proceedings occurred to obtain certified copies. For additional ex-spouses, please use the back of this form.

I hereby certify, subject to the penalty of perjury, that the above information is, to the best of my belief and knowledge, true and complete. ANY PERSON WHO SUPPLIES A FALSE CERTIFICATION IN CLAIMING A BENEFIT FORFEITS ANY RIGHT HE OR SHE MAY HAVE TO THE BENEFIT AND, UPON DISCOVERY, BECOMES LIABLE FOR FULL REPAYMENT OF ANY MONEY RECEIVED AS A CONSEQUENCE.

_____ _____

Your Signature Date

Place Notary Stamp/Seal Here

Subscribed to and sworn to before me,

This _____ day of _____, 20____.

_____

Notary Public, _____ County

State of _____

My Commission expires _____

*Notice to Notaries: Federal Law (i.e., the Retirement Equity Act of 1984) requires that the above Form must be executed in the presence of an authorized Plan representative or a Notary Public. Accordingly, it is most important that you not only witness the actual signature identified above, but also examine their credentials to satisfy yourself that they are, in fact, the same persons as the ones identified.

Prohibited Employment and Suspension of Benefits

You may not work in "Prohibited Employment" after you have retired and commenced your Pension under the Plan if you are younger than Normal Retirement Age. If you do, your Pension payments will be suspended for each month you are so employed under the rules described below. The Plan does not suspend benefits for work after Normal Retirement Age. Benefit payments under the PEO option are not subject to suspension due to Prohibited Employment.

Prohibited Employment

In general, you are engaged in "Prohibited Employment" if, prior to Normal Retirement Age:

- you are engaged in any employment or activity for wages or profit, including self-employment, in the building and construction industry, wherever such employment or activity may be performed;
- you are engaged in any type of employment for any employer who is engaged in any type of work or activity within the building and construction industry, wherever such employment or activity may be performed; or
- you are engaged in "maintenance work" for any employer wherever such maintenance work may be performed. For this purpose, "maintenance work" means the type of work generally covered by the provisions of a Written Agreement for the purpose of remodeling, renovating, or repairing existing facilities or equipment.

However, the following types of work are not considered Prohibited Employment: employment in non-contributory employment as an instructor, or in labor relations, or as a building inspector for a political subdivision of the United States, a state, a county, a city, or any other municipality, or a certified or licensed technician having received the requisite training and skills not available through the Iron Worker's journeyman and apprenticeship training programs, or as an inspector for independent testing laboratory, or an inspector for a Contributing Employer.

You may request an advance ruling from the Board of Trustees on whether a particular type of employment is Prohibited Employment.

Suspension of Pension Payments

Work in Prohibited Employment will not result in the suspension of your monthly Pension payments until you earn more than $12,000 in any calendar year. However, if you earn more than $12,000 in any calendar year, your monthly Pension payments will be permanently suspended for each subsequent month you work in Prohibited Employment. For participants receiving a Social Security Disability Pension, the nine-month trial work period provided by the Socal Security Act applies in place of the $12,000 earnings limit.

The Trustees may, from time to time, adopt temporary limited exemptions from the suspension of Pension payments for pensioners meeting specified criteria established by the Trustees. Separate notice is provided regarding any such exemptions that may be applicable.

Acknowledgement

I have read and understand the rules as stated above. I understand that I must furnish, at the request of the Board of Trustees, any information or proof reasonably required to determine my rights to benefits. If I willfully make a materially false statement, or I furnish fraudulent material, information, or proof to my claim, or I fail to provide any notification required, benefits under this Plan may be denied, suspended or discontinued. The Trustees have the right to recover any benefit payments made: 1) in reliance on any willfully made false or fraudulent statement, information or proof, 2) prior to the receipt of any required notifications, or 3) otherwise in error, except as prohibited by law. Upon retirement with a Pension from the Intermountain Ironworkers Pension Trust Fund, I understand and declare that I will be bound by the Rules and Regulations of the Plan.

_____	_____
Participant Name (Print)	Effective Date of Pension
_____	_____
Participant Signature	Date