

# **International Association of Heat and Frost Insulators & Allied Workers Local #3 Health and Welfare Fund**

33 FITCH BOULEVARD

AUSTINTOWN, OHIO 44515

1-800-435-2388

---

## **SUMMARY OF MATERIAL MODIFICATION FOR THE SUMMARY PLAN DESCRIPTION OF THE INTERNATIONAL ASSOCIATION OF HEAT and FROST INSULATORS & ALLIED WORKERS LOCAL NO. 3 HEALTH & WELFARE FUND**

The Trustees have made the following **CHANGES** to the Plan that will affect various provisions of your Summary Plan Description (SPD). This "Summary of Material Modification" explains this change and should be kept with your SPD. These changes are effective with the August 1, 2014 work month.

\* \* \* \*

Article XII, at the second paragraph is amended by the deletion of that provision in its entirety and by the insertion of the following:

Under the Bank Plan, contributions made by your Employer for hours work credited to your account are used to pay premiums for life insurance, accidental death and dismemberment coverage and dental and vision coverage, which are required under the plan. Participant's Bank Plan balances are charged 32 hours per month to pay premiums for these coverages. A balance of **96** hours is maintained in your account to cover these benefits. Any portion of your account which is in excess of **96** hours can then be used to reimburse you for eligible expenses incurred by you or your dependents that are not covered by any other group insurance plan you may have. The maximum that can be accumulated is hours equivalent to \$14,000.00.

\* \* \* \*

Please keep this information with your Summary Plan Description. If you should have any questions regarding these changes, please contact the Fund Office.

BOARD OF TRUSTEES  
INTERNATIONAL ASSOCIATION OF  
HEAT and FROST INSULATORS &  
ALLIED WORKERS LOCAL NO. 3  
HEALTH and WELFARE FUND