

# PIPEFITTERS LOCAL NO. 636 DEFINED CONTRIBUTION FUND

## AUTHORIZATION FORM FOR SELF-DIRECTED BROKERAGE ACCOUNT

In addition to the Mutual Funds available under the Pipefitters Local No. 636 Defined Contribution Plan, an allocation can be made to the Self-Directed Brokerage Account (Fidelity BrokerageFlex) available under the Plan.

By signing this form, I hereby authorize the transfer of \_\_\_\_ % of my total Defined Contribution account balance to the self-directed brokerage account.

NOTE: No more than 50% of your total account balance may be transferred to the self-directed brokerage account.

- The funds under the Self-Directed Brokerage Account will be held in custody of Fidelity Investments.
  
- 1. I have completed and attached the required BrokerageFlex account application form.\_\_\_\_\_
- 2. I have had the opportunity to talk with and consult with investment, accounting and legal experts of my own choosing prior to making this election.\_\_\_\_\_
- 3. In making this election, I am not relying on any statements or representation made to me by any Trustee of the Plan or any employee, agent or service provider of the Trustees.\_\_\_\_\_
- 4. I acknowledge that the limited right of investment in the Self Directed Brokerage Account of the Pipefitters Local No. 636 Defined Contribution Plan is a privilege, not a right, and that by exercising this privilege, I waive and relinquish any and all causes of action I may have or may have had against the Trustees and their agents, employees and service providers regarding this election of individual investment discretion.\_\_\_\_\_
- 5. I understand that the limited right of investment in the Self Directed Brokerage Account of the Pipefitters Local No. 636 Defined Contribution Plan can be changed or even revoked by the Board of Trustees of the Plan at any time.\_\_\_\_\_

In making this election, I acknowledge that I have received, read and understand the BrokerageFlex Account Terms and Conditions and that I have read the above in its' entirety.

X \_\_\_\_\_  
Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Email Address \_\_\_\_\_

X \_\_\_\_\_  
Witness Signature \_\_\_\_\_ Date \_\_\_\_\_

Current Total Account Balance: \_\_\_\_\_

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_