

Pension Valuation on Marriage Breakdown - Questionnaire

In addition to this questionnaire, please provide the following:

- a recent copy of the member's annual pension statement and any information received from the plan administrator
- a recent copy of the member's pension plan handbook for the pension plan if it is not available online (the pension plan handbook is provided by the pension plan administrator and summarizes the provisions of the pension plan)
- a completed 'Direction and Authorization' form

Contact Information for the Person Completing this Questionnaire	
Name:	
Address:	
Phone number:	Email:
Legal Representation (if applicable)	
Name of lawyer representing pension member:	
Name of lawyer representing non-member spouse:	
Member Pension Information	
Name of pension plan:	
Name and address of member's employer:	
Member's S.I.N. or employee number:	Member's rate of pay at date of separation:
Member's name:	Spouse's name:
Member's date of birth:	Spouse's date of birth:
Member's gender:	Spouse's gender:
Member's date of hire:	Member's date of plan membership:
Date of marriage:	Date of separation:
Member's personal RRSP account balance:	
Provide information about any other expected retirement income :	
Employment status: Salaried <input type="checkbox"/> Terminated <input type="checkbox"/> Disabled <input type="checkbox"/> (check box) Unionized <input type="checkbox"/> Retired <input type="checkbox"/>	
If 'Terminated', 'Retired' or 'Disabled', provide date of termination, retirement or disability:	
Please provide any other information that you feel is relevant:	

Please send the completed questionnaire, the completed 'Direction and Authorization' form, the annual pension statement and the pension plan handbook to BCH Actuarial Services Inc. Please notify us by email or phone if you are sending information by mail.

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