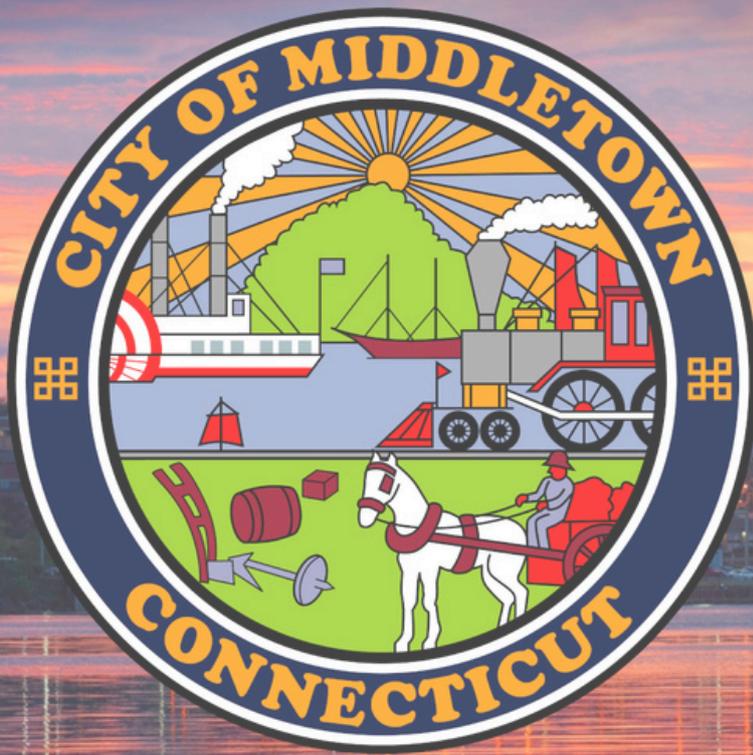


CITY OF MIDDLETOWN **RETIREMENT GUIDE**

A Reference for Voluntary Retirement





INTRODUCTION

Most people look forward to retirement as a rewarding time. But, a rewarding retirement doesn't just happen. It takes careful planning. Knowing when you can retire, how to put in your notice, and understanding your benefits are an important part of the planning process. This booklet highlights the main components of the City of Middletown retirement process.

While these tips are meant to point you in the right direction, you may need more information. Talk to the Human Resources Division should you have additional questions.

RETIREMENT PROCESS AT A GLANCE



Select a Retirement Date

This date refers to your last day physically working. This date should **not** include any accrued time you're allowed to run out according to your CBA. When selecting a date, keep in mind the advanced notice requirement outlined in your CBA.



Submit Your Formal Retirement Notice

A retirement notice is a formal written correspondence that informs the City of your intention of retiring.

Your written notice should include the following information:

- Your last day of actual work; and
- Your intent to use personal or vacation time between the date of the notice and the date of your last day of work.

Once your retirement date is selected and your intent is written, email or hand deliver your notice to the Human Resources Division. Human Resources will be in touch to review the exit process with you.



Schedule Exit Appointments

Once your intent is received, Human Resources will provide you with an Exit Process Checklist. On or before your last day of work, you must meet with the following individuals to complete the checklist form:

1. Your Department Head to relinquish all City property (keys, badge, FOB, etc.);
2. Risk Management Division for information on medical benefits, COBRA, and life insurance;
3. Payroll Division for information on pension benefits;
4. Department of Technology Services if you are in possession of a City cell phone, laptop, iPad, etc.; and
5. Human Resources Division for final review of the Exit Process Checklist and to complete an optional Exit Interview.



Enjoy Retirement

Thank you for your years of service and dedication to the City of Middletown!

WHEN CAN I RETIRE?

Local 466, AFSCME	Local 6457, UPSEU	Police Local 1361, AFSCME Council 4	Fire Local 1073, IAFF, AFL- CIO	Executive Nonbargaining
Vest: 10 years <i>Can collect pension at age 65</i>	Vest: 10 years <i>Can collect pension at age 65</i>	Vest: 10 years <i>Can collect pension at age 65</i>	Vest: 10 years <i>Can collect pension at age 65</i>	Vest: 10 years <i>Can collect pension at age 65</i>
Vest with Insurance Benefits: Hired prior to March 12, 2011 = 15 years Hired after March 12, 2011 = 20 years	Vest with Insurance Benefits: 15 years	Vest with Insurance Benefits: 15 years	Vest with Insurance Benefits: 15 years	Vest with Insurance Benefits: 15 years
Eligible for Retirement: 22 years OR Leave at 20 years & be eligible to receive pension benefit at 22 years	Eligible for Retirement: Elected Option A = 22 years Elected Option B = 20 years	Eligible for Retirement: 20 years	Eligible for Retirement: 20 years	Eligible for Retirement: 20 years
Notice Requirement to Separate from City Service: 2 weeks	Notice Requirement to Separate from City Service: 3 weeks	Notice Requirement to Separate from City Service: 2 weeks	Notice Requirement to Separate from City Service: 2 weeks	Notice Requirement to Separate from City Service: 3 weeks

WHEN CAN I RETIRE?

<p>BOE Local 1467, AFSCME</p>	<p>Library Local 1303-85, AFSCME</p>	<p>Defined Nonbargaining, Local 466 Piggyback</p>
<p>Vest: 10 years <i>Can collect pension at age 65</i></p>	<p>Vest: 10 years <i>Can collect pension at age 65</i></p>	<p>Vest: 10 years <i>Can collect pension at age 65</i></p>
<p>Vest with Insurance Benefits:</p> <p>Hired prior to March 12, 2011 = 15 years</p> <p>Hired after March 12, 2011 = 20 years</p>	<p>Vest with Insurance Benefits:</p> <p>Hired prior to March 12, 2011 = 15 years</p> <p>Hired after March 12, 2011 = 20 years</p>	<p>Vest with Insurance Benefits:</p> <p>Hired prior to March 12, 2011 = 15 years</p> <p>Hired after March 12, 2011 = 20 years</p>
<p>Eligible for Retirement:</p> <p>22 years OR Leave at 20 years & be eligible to receive pension benefit at 22 years</p>	<p>Eligible for Retirement:</p> <p>22 years OR Leave at 20 years & be eligible to receive pension benefit at 22 years</p>	<p>Eligible for Retirement:</p> <p>22 years OR Leave at 20 years & be eligible to receive pension benefit at 22 years</p>
<p>Notice Requirement to Separate from City Service:</p> <p>2 weeks</p>	<p>Notice Requirement to Separate from City Service:</p> <p>2 weeks</p>	<p>Notice Requirement to Separate from City Service:</p> <p>3 weeks</p>



HOW IS MY PENSION CALCULATED?



****When calculating a pension, each union has different rules and each member within a union may have unique circumstances, which could impact the calculation. It is important to set up an appointment with the Payroll Division when you are nearing retirement to understand all rules related to this process. ****

What Percentage of My Pay Will I Receive in Retirement?

When calculating the total percentage rate that will be applied to your pension eligible wages (as defined by either the relevant CBA or Personnel rules) to figure out your final pension number, a member's total completed years of service are multiplied by the pension multiplier specific to each group as set forth below. For instance, if a Local 466 employee works for the City for 22 years and decides to retire, that individual's total percentage rate would be $22 \times 2.25\%$ or 50%.

Rules that Apply to All Employees:

A total of 52 completed consecutive weeks are used to determine annual wages in all calculations. Partial weeks are not counted. If an employee's current year is considered to be one of their highest years but is not a full year, the next highest year that's not used in the calculation is backed into in order to complete the 52 consecutive weeks for calculation purposes.

Please note that W2 wages are not an accurate estimate of your annualized pay for these calculations as they may include non-pensionable wages and deductions.

WHAT IS MY PENSION CALCULATION?

<p>Local 466, AFSCME</p> <ul style="list-style-type: none"> • Any 3 Highest Years of Service • 2.25% Multiplier • 70% Maximum 	<p>Local 6457, UPSEU</p> <p>Health Plan Option A:</p> <ul style="list-style-type: none"> • Highest 3 Consecutive Years of Service • 2.25% Multiplier • 70% Maximum <p>Health Plan Option B:</p> <ul style="list-style-type: none"> • Highest 3 Consecutive Years of Service • 2.5% Multiplier • 80% Maximum 	<p>Police Local 1361, AFSCME Council 4</p> <ul style="list-style-type: none"> • Highest 3 Consecutive Years of Base Pay • 2.5% Multiplier • 70% Maximum <p style="text-align: center;">OR</p> <p>If hired after 9/8/2008 <u>or</u> elected option 2 for insurance during 2006-2013 CBA periods:</p> <ul style="list-style-type: none"> • Highest 3 Consecutive Years of Base Pay, and “base pay” includes 4% of replacement • 2.5% multiplier • 80% max for employees who have completed 32 years of service 	<p>Fire Local 1073, IAFF, AFL- CIO</p> <ul style="list-style-type: none"> • Highest 4 out of the Last 5 Years of Service • 2.5% Multiplier • 80% Maximum 	<p>Executive Nonbargaining</p> <ul style="list-style-type: none"> • Highest 3 Consecutive Years of Service • 2.5% Multiplier • 80% Maximum
<p>BOE Local 1467, AFSCME</p>	<p>Library Local 1303-85, AFSCME</p>	<p>Defined Nonbargaining, Local 466 Piggyback</p>		
<ul style="list-style-type: none"> • Any 3 Highest years of Service • 2.25% Multiplier • 70% Maximum 	<ul style="list-style-type: none"> • Any 3 Highest years of Service • 2.25% Multiplier • 70% Maximum 	<ul style="list-style-type: none"> • Any 3 Highest years of Service • 2.25% Multiplier • 70% Maximum 		

Frequently Asked Pension Questions and Answers:

What is the process for the Pension Exit Interview and when will it occur?

Once the employee notifies HR of their intent to retire, HR instructs them to reach out to Payroll to set up their exit meeting. During this exit meeting, Payroll will hand out federal and state tax forms, direct deposit, and Dutch Point forms, if applicable. These forms can be filled out either at the exit meeting or must be returned to Payroll no later than two weeks prior to receiving the initial pension payment. The prospective retiree also will need to fill out the City's pension application; Payroll will coordinate someone coming to the office to notarize it as required under our processes.

The following items will be discussed during the exit meeting:

- When the retiree can expect their first pension payment;
- Payout timing and rules related to unused vacation, compensatory, and sick time, if applicable;
- Various beneficiary scenarios; and
- What information to expect in their pension award letter.

What is the Payroll Division's policy on providing estimates?

Once an employee is within a year of reaching their required years of service to retire, they can contact the Payroll Division for an estimate. Upon request, the Payroll Division also will provide an estimate once the employee has received their required years of service to retire. If 6 months or more have passed since their last estimate and the employee intends to give their notice to retire, the employee may request another estimate.

Estimate Disclaimer: Future wages and/or payouts are not used in any estimates. All estimates are based on actual pensionable wages as of the date the estimate was provided. Final calculations are done once the employee has exhausted all time and has been paid out any owed accruals.

What is the 9 month rule and how does it apply for pension calculations?

An employee is credited with one (1) year of service when 9 uninterrupted months have been completed. This means that three (3) months prior **to the exact day** of the employee's pension date is considered one (1) year of service for pension calculations.

How does the Local 466/Local 1467/Library spousal pension increase apply?

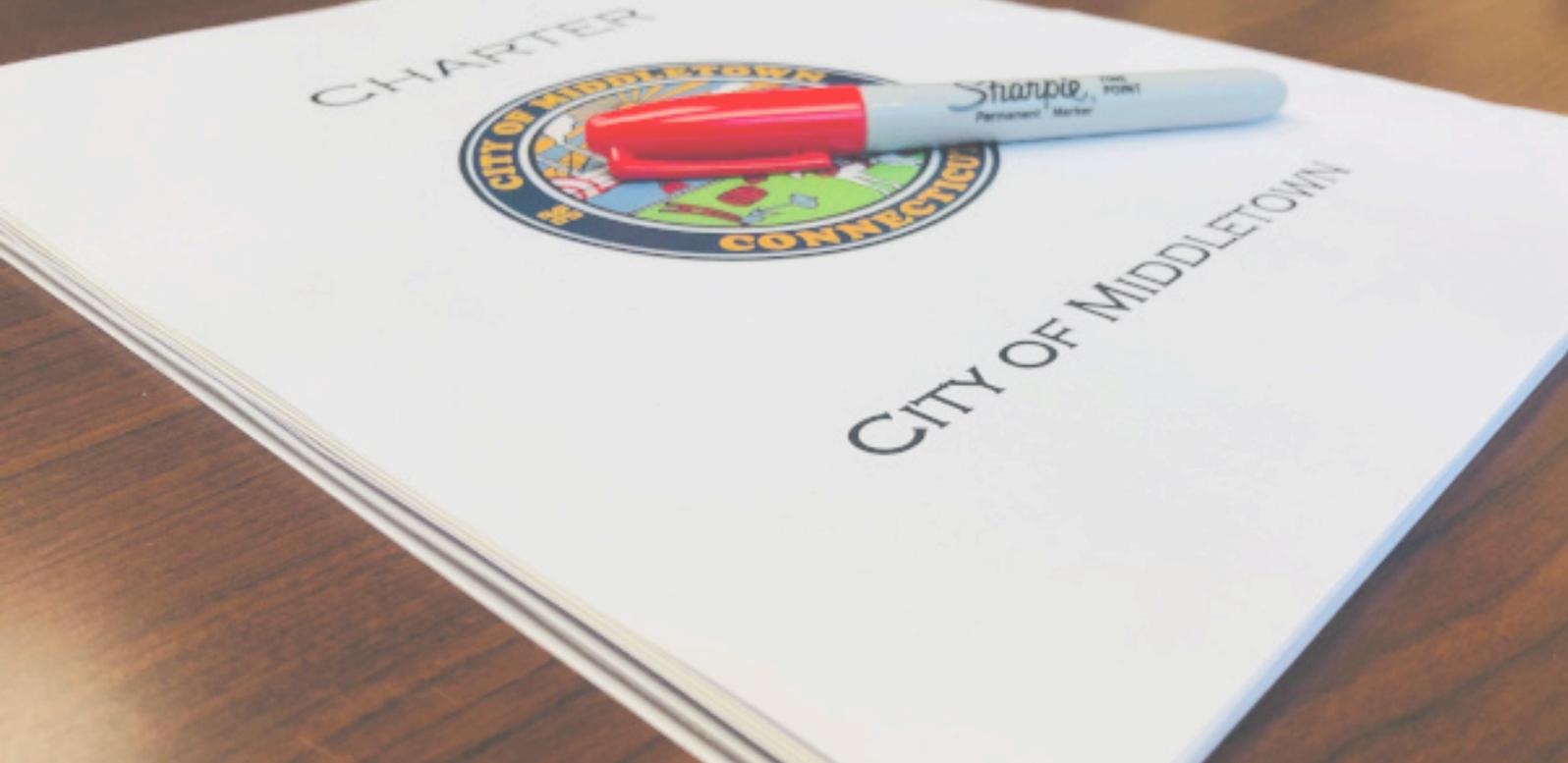
If a retiree opts to have their surviving spouse receive more than the standard 50% of their pension at the time of their death, the retiree must take a reduced pension, which begins with their first pension payment. Calculations are based on formulas provided by the City's actuary. Once the employee chooses this option it is irrevocable.

When can a retiree expect their first pension check?

If the retiree comes off the books prior to the 15th of the month, they will receive a prorated pension payment at the end of that month. If the retiree comes off the books after the 15th of the month, they will receive their first pension payment the following month, prorated from their retirement date of the previous month to the date of payment. Per the City's Retirement Plan, pension payments are made on the 26th of each month. If the 26th falls on a holiday or weekend, the payment will be made the next business day.

Does the Payroll Division provide live checks or deliver pension payments through direct deposit?

All new retirees receive their pension checks through direct deposit.



Employee Benefits to Consider at Retirement

Benefits are an extremely important piece of the retirement puzzle to consider. Please review the graphs on the next few pages for a breakdown of health, including medical, prescription and dental coverage, and life insurance benefits based on union affiliation, when you were hired, and age at retirement.

Once a retiring employee is fully off the books, the City will take the medical and life insurance premium deductions out of your monthly pension check, if you elected to receive these benefits. If you are not eligible to receive a pension benefit when you retire or must wait several years before receiving it and did vest for insurance, then you can make payments directly to the Risk Management Office by check to cover those premium payments.

Just like when you were an employee, retirees may change their benefits during the open enrollment period or during the year if there is a qualifying life event. The Risk Management Office will also send retirees an annual notice in June explaining the premium change for the next fiscal year.





Medicare A & B

Regardless of union membership or age at retirement, when a retiree and their spouse reaches the age 65, those individuals must enroll in Medicare Parts A & B and the City insurance will become secondary to Medicare. You will have to pay Medicare for this coverage and pay the City for the supplemental insurance if you choose to remain on the City's insurance plan.

The City is now offering those retirees who are eligible for Medicare the option of remaining on the current Cigna Open Access Plus plan or switching to the Cigna True Choice Medicare Advantage plan as the secondary option.



Increased Premiums if Working Elsewhere During Retirement

If you decide to work another job in retirement, please note that you may be responsible for paying a higher premium pursuant to your CBA if your new employer offers medical insurance and you remain on the City's plan. The amount of the increased premium depends on the contract under which you retire. Please see the next page for a breakdown of those additional fees.

Retirees can take the new employer's insurance and then return to the City's insurance plan within 30 days of terminating their other employment or at the next open enrollment.



Life Insurance

All unions allow life insurance to carry on after retirement. Check with the Risk Office to make sure your beneficiary designations are correct and update them as needed in retirement. Please refer to the breakdown on the next page to see changes that will occur at retirement and if there are any premium deductions.



Colonial Life

New retirees who are enrolled in Colonial Life plans will be able to take those plans with them at the time they are off the books at the same rate they are currently paying. Once we receive your intent to retire, the City alerts Colonial Life that you will be retiring and then you must contact Colonial directly to set up payments if you choose to continue with this benefit.



Flex Spending and Dependent Care Accounts

Retirees are not eligible to participate in the Flexible Spending Account or Dependent Care Account programs. Any funds left in the account(s) at retirement will be forfeited to the City. If you are aware of your retirement date in advance, make sure to consider that date when calculating your contributions for the year of your retirement so you do not lose any funds.



Worker's Compensation Offset

If you have any monies owed to you by the City from a workers' compensation claim and the funds are paid out after you retire from the City, those funds will offset your pension payments. Please see Article VI 6.06 of the Retirement Plan of the City of Middletown for further information.

WHAT WILL MY BENEFITS COST ME?

Health Insurance (Medical, Prescription and Dental)

Local 466, AFSCME	Local 6457, UPSEU	Police Local 1361, AFSCME Council 4	Fire Local 1073, IAFF, AFL- CIO	Executive Nonbargaining
<p><u>Hired prior to 1/8/2018</u></p> <ul style="list-style-type: none"> > 46 = same as actives up to 20% < 46 = 50% employee + 50% spouse/dependent <p><u>Hired after to 1/8/2018</u></p> <ul style="list-style-type: none"> < 46 = 80% employee + 80% spouse/dependent 46-55 = 60% employee + 50% spouse/dependent 55+ = 50% employee = 50% spouse/dependent <p>5% premium increase if new employer offers insurance</p>	<p><u>Elected Option A</u></p> <ul style="list-style-type: none"> Same as actives up to 25% <p><u>Elected Option B</u></p> <ul style="list-style-type: none"> < 45 = 80% 45-54 = 60% 55-61 = 35% 62+ = same as actives up to 25% <p><u>Hired after 7/1/2006</u></p> <ul style="list-style-type: none"> < 45 = 80% 45-54 = 60% 55-61 = 35% 62+ = same as actives up to 35% <p>Premium will be 24% if new employer offers insurance</p>	<p><u>Option 1</u></p> <ul style="list-style-type: none"> Same cost share on last day of employment through retirement <p><u>Option 2</u></p> <ul style="list-style-type: none"> <45 = 100% 45-47 = 75% 48-49 = 50% 50-51 = 35% >52 = same as actives up to 25% <p><u>Hired after 1/6/2009</u></p> <ul style="list-style-type: none"> <45 = 100% 45-47 = 75% 48-49 = 50% 50-51 = 35% >52 = same as actives up to 25% <p>Premium will be 24% if new employer offers coverage equal to City's insurance if current percentage is less</p>	<p><u>Hired prior to 7/1/2019</u></p> <ul style="list-style-type: none"> Same cost share as actives up to 20% <p><u>Hired after 7/1/2019</u></p> <ul style="list-style-type: none"> <45 = 80% 45-47 = 60% 48-49 = 50% 50-51 = 25% >52 = same as actives up to 25% <p>Premium will be 20% if new employer offers coverage equal to City's or higher percentage as determined by Option 1 or 2</p>	<p><u>Hired before 1/1/2016</u></p> <ul style="list-style-type: none"> Same cost share on last day of employment through retirement <p><u>Hired after 1/1/2016</u></p> <ul style="list-style-type: none"> <45 = 100% 45-47 = 75% 48-49 = 50% 50-51 = 35% >52 = same as retirees up to 25%

WHAT WILL MY BENEFITS COST ME?

Health Insurance (Medical, Prescription and Dental)

<p>BOE Local 1467, AFSCME</p>	<p>Library Local 1303-85, AFSCME</p>	<p>Defined Nonbargaining, Local 466 Piggyback</p>
<p><u>Hired prior to 1/8/2018</u></p> <ul style="list-style-type: none"> • > 46 = same as actives up to 20% • < 46 = 50% employee + 50% spouse/ dependent <p><u>Hired after to 1/8/2018</u></p> <ul style="list-style-type: none"> • < 46 = 80% employee + 80% spouse/ dependent • 46-55 = 60% employee + 60% spouse/ dependent • 55+ = 50% employee = 50% spouse/ dependent <p>5% premium increase if new employer offers insurance</p>	<p><u>Hired prior to 3/19/2018</u></p> <ul style="list-style-type: none"> • > 46 = same as actives up to 20% • < 46 = 50% employee + 50% spouse/ dependent <p><u>Hired after to 3/19/2018</u></p> <ul style="list-style-type: none"> • < 46 = 80% employee + 80% spouse/ dependent • 46-55 = 60% employee + 60% spouse/ dependent • 55+ = 50% employee = 50% spouse/ dependent <p>5% premium increase if new employer offers insurance</p>	<p><u>Hired prior to 1/8/2018</u></p> <ul style="list-style-type: none"> • > 46 = same as actives up to 20% • < 46 = 50% employee + 50% spouse/ dependent <p><u>Hired after to 1/8/2018</u></p> <ul style="list-style-type: none"> • < 46 = 80% employee + 80% spouse/ dependent • 46-55 = 60% employee + 60% spouse/ dependent • 55+ = 50% employee = 50% spouse/ dependent <p>5% premium increase if new employer offers insurance</p>

WHAT WILL MY BENEFITS COST ME?

Life Insurance

Local 466, AFSCME	Local 6457, UPSEU	Police Local 1361, AFSCME Council 4	Fire Local 1073, IAFF, AFL- CIO	Executive Nonbargaining
<p><u>Hired prior to 3/12/2011</u></p> <ul style="list-style-type: none"> \$49,000 no monthly premium <p><u>Hired after to 3/12/2011</u></p> <ul style="list-style-type: none"> \$25,000 \$10/month 	<ul style="list-style-type: none"> 2x final base annual salary \$12/month 	<ul style="list-style-type: none"> 2x final base annual salary \$5/month 	<p><u>Hired prior to 7/16/2008</u></p> <ul style="list-style-type: none"> 1x final base annual salary \$5/month <p><u>Hired after 7/16/2008</u></p> <ul style="list-style-type: none"> \$25,000 at active member rate 	<ul style="list-style-type: none"> 2x final base annual salary \$6/month

BOE Local 1467, AFSCME	Library Local 1303-85, AFSCME	Defined Nonbargaining, Local 466 Piggyback
<p><u>Hired prior to 3/12/2011</u></p> <ul style="list-style-type: none"> \$49,000 No monthly premium <p><u>Hired after to 3/12/2011</u></p> <ul style="list-style-type: none"> \$25,000 \$10/month 	<p><u>Hired prior to 3/12/2011</u></p> <ul style="list-style-type: none"> \$49,000 No monthly premium <p><u>Hired after to 3/12/2011</u></p> <ul style="list-style-type: none"> \$25,000 \$10/month 	<p><u>Hired prior to 3/12/2011</u></p> <ul style="list-style-type: none"> \$49,000 No monthly premium <p><u>Hired after to 3/12/2011</u></p> <ul style="list-style-type: none"> \$25,000 \$10/month

Exit Interview
Checklist

**Forms that will be
discussed with
you at your Exit
Interviews**

EXIT INTERVIEW **INSTRUCTIONS**

1. The Employee must complete the exit checklist form and return to the Human Resources Division before the employee's last day of work.
2. The Employee will relinquish all City property in his/her custody to the Department Head/Supervisor. The supervisor will list such items on the exit checklist form and sign off.
3. The Employee will then go to the Risk Manager's Office for information on Medical Benefits under COBRA and Life Insurance Conversion option. Risk Manager will also sign off on this Exit Form.
4. The Employee will proceed to the Finance Department for information on Pension Benefits and will also have Exit Form signed in the appropriate place.
5. Finally, the Employee will come to the Human Resources Division. Human Resources will review the Exit Checklist Form with the employee to assure that the employee has been given all appropriate information.

CITY OF MIDDLETOWN

Employee Exit Interview Form

Date: _____

Social Security
Number _____

Name: _____

Location/
Department _____

Supervisor _____

Hire Date: _____

Last Day Worked _____

Starting Position _____

Ending Position _____

Starting Salary _____

Ending Salary _____

Part I: Reasons For Leaving

More than one reason may be given if appropriate; if so, circle primary reason.

*** RESIGNATION**

- | | |
|--|---|
| <input type="checkbox"/> Took another position | <input type="checkbox"/> Dissatisfaction with salary |
| <input type="checkbox"/> Pregnancy-Home/Family needs | <input type="checkbox"/> Dissatisfaction with type of work |
| <input type="checkbox"/> Poor health-physical disability | <input type="checkbox"/> Dissatisfaction with supervisor |
| <input type="checkbox"/> Relocation to another city | <input type="checkbox"/> Dissatisfaction with co-workers |
| <input type="checkbox"/> Travel difficulties | <input type="checkbox"/> Dissatisfied with working Cond. |
| <input type="checkbox"/> To attend school | <input type="checkbox"/> Military leaves of absence (6 mo. or more) |
| <input type="checkbox"/> No response to recall from layoff | <input type="checkbox"/> Failure to return from leave of absence |
| <input type="checkbox"/> Other (Specify) _____ | |

***LAID OFF**

- Lack of Work
- Plant/Facility closure
- Abolition of position
- Lack of funds

***RETIREMENT**

- Voluntary Retirement
- Compulsory Retirement

***DISCHARGE**

- | | |
|--|--|
| <input type="checkbox"/> Absenteeism | <input type="checkbox"/> Tardiness |
| <input type="checkbox"/> Violation of rules, policies, etc | <input type="checkbox"/> Dishonesty |
| <input type="checkbox"/> Unsatisfactory with performance | <input type="checkbox"/> Insubordination |
| <input type="checkbox"/> Intoxication | <input type="checkbox"/> Drug addiction |
| <input type="checkbox"/> Other (Specify) _____ | |

Part II: Employee Comments/Suggestions for improvement.

1. What did Employee like most about his/her job?

2. What did the Employee like least about his/her job?

3. How did the Employee feel about pay and benefits?

Part III: Special Comments: _____

Interviewer's Signature

Title

Date

Finance/Payroll Department

3. Pension Benefits were discussed with the Employee? () Yes () No
- a. Retirement application completed? () Yes () No
- b. Accrued vacation and sick time was discussed with employee. () Yes () No

You can use vacation and personal time to get your desired retirement date. You CANNOT use your accrued sick time to get to your desired retirement date nor will you be able to run out any sick time after submitting your intent to retire. Any remaining sick time that you have on the books at the time of your retirement will be paid out in the amount and manner prescribed by your CBA.

- Please initial that you have read and understand this section. _____

(For Police Only) – Pursuant to Art. 16 Section 15 of the CBA – A retiring employee may take prior to retirement the fifty percent (50%) of accumulated sick leave not to exceed seventy-five (75) working days in the form of time off with pay rather than additional compensation.

- Please initial that you have read and understand this section. _____

Finance Director/Designee Signature

Risk Management Division

4. The following was discussed with the Employee
- a. Medical benefits under COBRA () Yes () No
- i. Amount of Premium () Yes () No
- ii. Length of coverage () Yes () No
- b. Life Insurance Conversion Option () Yes () No
- c. Medical & Life Insurance at Retirement () Yes () No
- i. Are you planning on seeking employment upon retirement? () Yes () No
- ii. If yes, does your new employer provide health insurance? () Yes () No
- d. Colonial Life Benefits () Yes () No
- e. FSA Account Balance () Yes () No

Risk Manager/Designee Signature

Information Technology Department

5. All Electronic Devices returned Yes No Not Applicable
- a. Discussed all computer related issues? Yes No Not Applicable
- b. Assigned mobile devices or laptops returned? Yes No Not Applicable

Computer/Designee Signature

Human Resources Division

6. Exit form was reviewed with the Employee. Yes No
- a. Right to file for Unemployment discussed with employee? Yes No
- b. Pink Slip issued? Yes No

Employee Signature

Date

Interviewers Signature

Date



City of Middletown

RISK MANAGEMENT
245 deKoven Drive
Middletown, CT 06457-1300

Employee Name: _____ Active Employee Number: _____

Employee Contact Number: _____

Employee Email: _____

Employee Address: _____

COBRA Option: Yes ___ No: ___ N/A: ___ If yes, premium: _____ Length of time: ___ months

Eligible for medical at retirement: Yes _____ No: _____

Current Enrollment Setup: EE _____ EE+1 _____ Family _____

If yes, monthly deduction: _____

You will be required to elect Med A&B when you turn 65 and must pay for it in addition to the City's policy which will become secondary if you choose to keep the policy: N/A: _____ **Employee Initials** _____

Are you planning on seeking employment upon retirement? Yes ___ No ___

If yes, does the new employer offer insurance? Yes: ___ No: ___ N/A: ___

Premium amount if insurance is offered by new employer: _____ **Employee Initials** _____

Life Insurance Amount: _____ Monthly deduction amount, if applicable: _____

Does employee want to continue with Life Deduction: Yes _____ No _____ N/A: _____

Colonial Life: Yes _____ No _____

Flex Spending Account: Yes _____ No _____

Yes, this information was reviewed with me on _____ **(date)** and I acknowledge I understand everything discussed _____ **(signature)**

Internal

Projected date off books: _____

Deduction paperwork sent to Payroll: Yes ___ No ___ N/A ___ Retirement letter sent out: Yes ___ No ___

Changes made: Cigna _____ Express Scripts _____ Life Insurance _____

LOCAL 466-CITY/ LOCAL 1467-BOE/ LOCAL 1303-85 LIBRARY

THE CITY OF MIDDLETOWN AND LOCALS 466, 1467 AND 1303-85 AGREED TO THE FOLLOWING CHANGE IN YOUR PENSION SYSTEM:

MEMBERS OF THE LOCAL #466, #1467, OR #1303 WHO, AT THE TIME OF RETIREMENT, DESIRE THEIR SPOUSE TO COLLECT AN AMOUNT GREATER THAN FIFTY PERCENT (50 %) OF THE PENSION BENEFITS DUE, MAY HAVE SAID SPOUSE RECEIVE SUCH BENEFITS. IN SUCH CASE, THE EMPLOYEE'S OWN PENSION BENEFIT WILL BE REDUCED ACTUARIALLY BY THE AMOUNT ABOVE THE FIFTY PERCENT (50%) RECEIVED BY SAID SPOUSE.

EMPLOYEE NAME: _____

DATE OF RETIREMENT: _____

EMPLOYEES DATE OF BIRTH: _____

NEAREST AGE AT RETIREMENT: _____

SPOUSE'S DATE OF BIRTH: _____

NEAREST AGE AT EMPLOYEE'S RETIREMENT: _____

OPTIONS AVAILABLE

PERCENT OF SPOUSE'S BENEFIT UPON DEATH OF RETIREE	AMOUNT OF EMPLOYEE'S BENEFIT	AMOUNT OF SPOUSE'S BENEFIT UPON DEATH OF RETIREE
50% (PRESENT WAY)		
66 2/3%		
75%		
100%		

PLEASE STATE THE OPTION YOU WISH YOUR SPOUSE TO RECEIVE, SIGN AND DATE THIS LETTER.

PLEASE NOTE: ONCE AN OPTION HAS BEEN SELECTED, THE RETIREMENT AGREEMENT CANNOT BE CHANGED.

PERCENT OF SPOUSE'S BENEFIT UPON DEATH OF RETIREE _____%

DATE

SIGNATURE

DATE

WITNESS



Finance Department
 Payroll Division
 245 deKoven Drive
 Middletown, CT 06457

City of Middletown, Connecticut

Authorization Agreement for Payroll Direct Deposit

I request that my net pay be deposited at:

Name of Financial Institution

I hereby authorize the direct deposit of my net pay by my employer in the account and financial institution indicated on the right. Such direct deposit will be made each Thursday.

City, State and Zip Code

I assume the responsibility for verification of my payroll deposit amounts. If I choose to terminate my direct deposit, I will supply written notification to the Payroll Department.

*****PLEASE NOTE: CHANGING TO A DIFFERENT FINANCIAL INSTITUTION REQUIRES TWO WEEKS. YOU WILL RECEIVE AN ACTUAL CHECK THE FIRST WEEK AFTER THE CHANGE AND THEN WILL GO LIVE THE SECOND WEEK****

Any such notification to my employer will become effective following receipt, after a reasonable opportunity to act on it.

Select only **ONE** Account

Checking _____ Savings _____

If my employer deposits funds erroneously into my account, I authorize my employer to debit my account for an amount not to exceed the original amount of the credit.

Bank Routing # _____

Account # _____

Name **(Please Print)** _____

Social Security# _____

Employee Signature _____

Employee # (from your paystub) _____

Date _____

Department _____

***Note: A voided check or photocopy of a voided check that has your name printed on it or a form from your Financial Institution, signed by a representative, stating your name, social security number and the routing and account numbers must be attached to this form to assure that the correct information is entered properly into the payroll system. Please sign above and return to the Payroll Office.**



**Finance Department
Payroll Division
245 deKoven Drive
Middletown, CT 06457**

**Middletown City Employees' Pension System
Retirement Application**

To The Retirement Board,
City of Middletown, Connecticut

I, _____ respectfully request retirement from
Print Name

_____ at _____
Permanent Disability or Service (Age Nearest Birthday)

on _____ with _____
(Date you wish to retire-not more than 60 days) (Length of Service)

years of continuous service.

Present address _____
(Street & Number) (City or Town) (State)

Address after Retirement _____
(Street & Number) (City or Town) (State)

In the event of my death, to the extent the Plan does not require payment to my spouse or child(ren), I hereby authorize the payment of any funds due to me from the City Employees' Retirement System to:

Name of beneficiary

Address of beneficiary

WITNESS:

Name

Street & Number

City or Town State

(Employee requesting retirement must SIGN name HERE IN INK)

State of Connecticut ss Middletown _____ 20____

County of Middlesex

Personally appeared _____ whose signature appears above and who made oath that the statements included herein were true and correct and that application for retirement is made of his or her own free will, before me this _____ day of _____, 20____.

Notary Public