

Please complete this form and return to our office by mail, email and/or fax

MEMBER INFORMATION

LPF ID Number		Date of Birth (yyyy/mm/dd)		Home Local	Gender
Last Name		First Name		Middle Name	
Address					Apt/ Suite #
City	Province	Postal Code	Primary Phone		
Email			Other Phone		
Old / Temporary Social Insurance Number					
New / Permanent Social Insurance Number					

REASON FOR REQUEST

All requests to transfer contributions require a copy of your Social Insurance Number(s) and a piece of photo identification, such as Drivers License / Resident Card / Passport

- Government SIN:** Member has earned credits under a government assigned temporary SIN and has now been provided a government assigned permanent SIN

- Replacement SIN:** Member has been assigned a new government SIN replacing a lost or fraudulently used SIN

- Temporary SIN:** Member has earned credits under a temporary SIN assigned by the Local Union or the LiUNA Pension Fund

- Remittance Error:** Employer has remitted under the incorrect SIN

One or more of the following documentations will be accepted as supporting documents to comply with your request

- Sworn Affidavit
- Confirmation letter from Revenue Canada
- Confirmation letter from Contributing Employer
- Any tax receipt showing your full SIN / Pay Stub showing your full SIN

Signature	Date (yyyy/mm/dd)
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