



# Eighth District Electrical Pension Fund



Administrative Office  
2821 SOUTH PARKER ROAD  
SUITE 215  
AURORA, COLORADO 80014  
(303) 745-1539



## APPLICATION FOR VESTED RIGHTS

Read each question carefully. Print or type all information. Be sure to sign and date this application.

Mail the completed application to: Eighth District Electrical Pension Fund  
2821 S. Parker Road, Suite 215  
Aurora, CO 80014

### PERSONAL DATA:

Name \_\_\_\_\_

Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

### EMPLOYMENT HISTORY – UNION MEMBERSHIP:

Name and address of present or most recent employer in the industry

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Local Union # \_\_\_\_\_ City & State \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Local Union # \_\_\_\_\_ City & State \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Local Union # \_\_\_\_\_ City & State \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ Check here if you have worked in a jurisdiction that does not have a defined benefit plan and you have reciprocated your defined contribution plan hours/contributions back to the Eighth District Electrical Pension Fund.

I hereby apply for a determination by the Eighth District Electrical Pension Fund as to the vesting of my Pension Credit.

Date \_\_\_\_\_ Signature \_\_\_\_\_