Application for Service Retirement

MEMBER INFORMATION

Please type or use only black ink and do not highlight. Any corrections must be initialed.

TMRS Identification Number (Not required)

Member's Name (first, middle, last)

Social Security Number

Mailing Address

Daytime Phone Number

City | State | Zip

Employing City

I certify that **I was** ☐ **/ was not** ☐ a Public Safety Employee when I separated from service from the employing city listed below.
(Public Safety Employee is defined in the instructions provided with this form.)

I hereby make formal application for service retirement benefits in accordance with the provisions of

Subtitle G, Title 8, Texas Government Code, to be effective on the last day of _____.
Date (MM/YYYY)

Note: *The retirement date must be the last day of the calendar month, cannot precede the date you terminate employment, and cannot precede the date you file this application. By signing the application below, you agree to waive any requirement to file the application at least 30 days before the effective date of your retirement. In addition, your city may have specific notification requirements. Please check with your city personnel office to ensure all city requirements have been satisfied.*

I do ☐ / **I do not** ☐ elect to receive a **partial lump-sum distribution** upon my retirement.
All lump-sum distributions will be made as a one-time payment, payable at the same time as the first monthly annuity payment. Election of the partial lump-sum distribution will reduce my monthly annuity payment.

MEMBER CERTIFICATION

I understand that if I am employed by any TMRS member city after my retirement, in a position requiring at least 1,000 hours of duty per year, I will resume membership in the System and make required contributions as an active member. If the city is a **different** city than the one I retired from, I understand that I will continue to receive a monthly annuity. However, if I return to work for the **same** city I retired from, I understand that the monthly annuity will be suspended until such time as my employment with the city terminates.

Member's Signature

Date Signed (MM/DD/YYYY)

EMPLOYER CERTIFICATION

I certify that the above named applicant is known to me and that he/she has been an employee of this city. I further certify that this applicant's employment with the city has/will terminate **on** _____ and that all of the applicant's retirement contributions will have been submitted to TMRS with the city's payroll report for the ***month of retirement.***
Date (MM/YYYY)

Signature of City Official

Date Signed (MM/DD/YYYY)

Printed Name and Title

Employing City

Please read the instructions provided with this form.

TMRS • P.O. Box 149153 • Austin, Texas 78714-9153 • 800.924.8677 • 512.476.7577 • FAX 512.476.5576 • www.TMRS.com
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TMRS0015

THE APPLICATION PROCESS

- The Application for Service Retirement form allows you to make formal application for service retirement with the Texas Municipal Retirement System. This form also indicates whether you wish to take a partial lump sum distribution. If you are taking a partial lump sum distribution, you must also complete the Selection of Partial Lump Sum Distribution form and return the form to TMRS along with your retirement application.
- Your retirement date must be the last day of the calendar month, cannot precede the date you terminate employment and cannot precede the date you file this application. By signing this application, you agree to waive any requirement to file the application at least 30 days before the effective date of your retirement. **Note: Your retirement application must be received by TMRS no later than your retirement date and not earlier than 90 days prior to your retirement date.**
- Your employing city may have specific requirements for you to notify them of your retirement. Notifying your city and applying to TMRS for retirement are two separate processes. Please coordinate your retirement with your city personnel office to ensure you have met the city's requirements.
- You must complete the following forms before TMRS issues your first payment:
  - Application for Service Retirement — to be completed by you and certified by your employer
  - Selection of Retirement Plan
  - Selection of Partial Lump Sum Distribution — to be completed by you ONLY if you elect to receive a partial lump sum distribution.
  - Your proof of birth (photocopy)
  - Proof of birth for your designated beneficiary only if you choose one of the Retiree Life with Survivor Benefits options

    NOTE: *If the birth name on the proof of birth is different from the names provided on your application (for you or your beneficiary), a Name Certification will need to be completed.*

  - Electronic Direct Deposit Authorization — Retiring members must have their monthly annuity payments electronically deposited to their financial institutions.

RETURNING TO WORK

- If you become reemployed by this city at a later date, in a membership-eligible position, your monthly benefit payments from this city will be suspended during your post-retirement employment.
- When your post-retirement employment ends, you must apply for the resumption of your suspended monthly benefit payment. At that time, you will also be eligible to elect:
  1. A lump sum refund of your post-retirement deposits and interest earnings, if any, or
  2. An additional monthly benefit payment based on the retirement credits earned during your post-retirement employment.

WHEN TO EXPECT PAYMENT

Retirement payments will begin the last day of the month following the effective date of retirement.

NOTE: *Monthly payments will be electronically deposited to your financial institution.*

TMRS WILL NOT ACCEPT

- Illegible forms. All forms should be typed. Handwritten forms will be accepted only if legible and if completed in black ink.
- Alterations without initials.
- An incomplete form or any attempt to change its provisions.

PUBLIC SAFETY EMPLOYEE

Under the 2006 Pension Protection Act, the 10% early withdrawal tax is waived for distributions made to public safety employees who separate from service during or after attaining age 50. A "qualified public safety employee" is defined as any employee of a state (or political subdivision) whose principal duties include services requiring specialized training in the area of police protection, fire-fighting services, or emergency medical services for any area within the jurisdiction of the state (or political subdivision). TMRS will require city certification from the city of last employment to qualify for this waiver. A certification form will be provided directly to the city once TMRS is notified that an employee may qualify.