Eckler Ltd. - Vancouver Steelworkers Pension Plan Administration Office
475 West Georgia Street, Suite 540, Vancouver, British Columbia, V6B 4M9
Telephone: 1-888-419-4704 ● Email: vspp@eckler.ca

Vancouver Steelworkers Pension Plan

Notice of Death of a Member

Instructions: This form is to be completed by the person who is representing the deceased member's estate and returned to our office along with the following:

☐ **Proof of member's death.** Provide a copy of the death certificate or funeral director's statement of death,
☐ **Proof of member's birth.** Provide a valid copy of the member's driver's license, passport, resident or citizenship card, birth or baptismal certificate. If the deceased member's birth date is provided on the death certificate, then there is no requirement to submit proof of member's birth.
☐ **Certification of deceased member's spousal status** (see attached form),
☐ **Proof of appointment of estate trustee/executor**, e.g. Will (if applicable).
☐ **Proof of identity for the informant.** Provide a valid copy of your driver's license, passport, resident or citizenship card, birth or baptismal certificate.

Employer Name	Employer Number	Employee ID

Part I: Deceased Plan Member's Information

Full Name	Date of Birth (MM, DD, YY)
Social Insurance Number	**Date of Death (MM, DD, YY)**

Part II: Spousal Information

Province of legislation and employment is:

Please find below, the definition of spouse based on applicable provincial legislation.
You are a "Spouse" under the Family Law Act if you are or were married, or you have lived with another person in a marriage-like relationship, sometimes called common-law, for a certain period of time. *
* persons who have lived together in a marriage-like relationship for at least two years

Note: If on the date of death, the person defined as spouse under clause (a) above, is living separate and apart, that spouse does not have an entitlement under the plan

Full Name of Spouse	Social Insurance Number	Date of Birth (MM, DD, YY)	Telephone Number

Address (street number, name & apt.)	City	Province	Postal Code

Part III: Informant's Information

Your full name (please print)	Your e-mail address

Relationship to Deceased Member **(please check one)**

☐ Spouse (married)

☐ Spouse (not married but living together)

☐ Executor or legal representative of deceased member's estate

☐ Other (please specify) _____

Address (street number, name & apt.)	City	Province	Postal Code

Applicant's Signature	Date	(Area Code) & Telephone Number

Please complete this form and mail it to:

Vancouver Steelworker Pension Plan Administration Office
475 West Georgia Street, Suite 540, Vancouver, BC, V6B 4M9

Eckler Ltd. - Vancouver Steelworkers Pension Plan Administration Office
475 West Georgia Street, Suite 540, Vancouver, British Columbia, V6B 4M9
Telephone: 1-888-419-4704 ● Email: vspp@eckler.ca

Vancouver Steelworkers Pension Plan

Certification of Deceased Member's Spousal Status

Instructions: This form should be completed by the executor or legal representative of the estate for the deceased member of the Vancouver Steelworkers Pension Plan and not the spouse of the deceased member (as defined below). If there is neither an executor nor legal representative, a professional person – such as a doctor, lawyer, accountant, etc. – who knew the deceased for at least three years before the member's death, must complete this form to confirm the deceased member's spousal status at the time of his or her death. This form must be completed before any death benefit will be paid from the Plan.

Employer Name	Employer Number	Employee ID

Part I: Deceased Plan Member's Information

Full Name	Date of Birth (MM, DD, YY)
Social Insurance Number	**Date of Death (MM, DD, YY)**

Part II: Please initial Statement 1 or 2, and complete the information within

Province of legislation and employment is:
Please find below, the definition of spouse based on applicable provincial legislation.
You are a "Spouse" under the Family Law Act if you are or were married, or you have lived with another person in a marriage-like relationship, sometimes called common-law, for a certain period of time. *
* persons who have lived together in a marriage-like relationship for at least two years

Note: If on the date of death, the person defined as spouse under clause (a) above, is living separate and apart, that spouse does not have an entitlement under the plan

I, _____, have known _____for_____
Affiliated professional or executor ***Deceased member*** ***Number***

years and to the best of my knowledge…

☐ **Statement 1:** …the deceased has a spouse as defined above, on the date of his/her death (_____). Name of Spouse is _____.
Print member's date of death ***Print name of spouse***

OR

☐ **Statement 2:** …there is no indication that the deceased had a spouse, as defined above, on the date of his/her death (_____).
Print member's date of death

Print name	Affiliated Professional Association (not applicable if you are the executor)	Signature
Complete mailing address		**Phone Number**

Witness Name (anyone 18 years or older)	Witness signature	Phone Number
Complete mailing address for witness		**Date**