

Email message – August 16, 2019

TO: Certifying Officers – Police and Firemen’s Retirement System (PFRS), Public Employees Retirement System (PERS), and State Police Retirement System (SPRS)

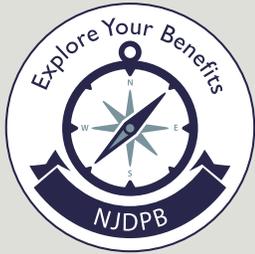
FROM: New Jersey Division of Pensions & Benefits (NJDPB)

SUBJECT: P.L. 2019, c. 157 (Chapter 157) Employer Confirmation of Distribution Form

It has come to our attention that some employers may have experienced difficulties submitting the *Employer Confirmation of Distribution Form* that was recently sent as an attachment via the Certifying Officer letter regarding Chapter 157, The Bill Ricci World Trade Center Rescue, Recovery, and Cleanup Operations act.

Employers who have completed the form but were not able to submit via the Online Document Submission via EPIC, or employers who have not yet completed and/or attempted to submit, should use the attached form. To ensure the form is able to be submitted, please print the form to hand-complete and sign, and then scan it for submission. Do not attempt to complete the form electronically.

Do not reply to this email message or mailbox. Incoming messages cannot be received. If you have questions or concerns about the content of this message, contact the New Jersey Division of Pensions & Benefits at: [pensions.nj@treas.nj.gov](mailto:pensions.nj@treas.nj.gov)



State of New Jersey • Department of the Treasury

**DIVISION OF PENSIONS & BENEFITS**

P.O. Box 295, Trenton, NJ 08625-0295

**EMPLOYER CONFIRMATION OF DISTRIBUTION FORM**

In accordance with P.L. 2019, c.157 (Chapter 157), the Bill Ricci World Trade Center Rescue, Recovery, and Cleanup Operations Act allows eligible PFRS, SPRS, and certain PERS members or retirees the right to file for an Accidental Disability Retirement should they become disabled at a later date due to participation in the rescue, recovery, or cleanup operations at the World Trade Center.

I, \_\_\_\_\_, hereby acknowledge receipt and distribution to this  
*Name of Certifying Officer*

location's employees of the information pertaining to Chapter 157, the Bill Ricci World Trade Center Rescue, Recovery, and Cleanup Operations Act.

Name of Location \_\_\_\_\_

Location Number \_\_\_\_\_

\_\_\_\_\_  
*Certifying Officer Signature*

\_\_\_\_\_  
*Month/Day/Year*

**Note:** If you are the certifying officer of multiple locations, you must complete an *Employer Confirmation of Distribution Form* for each location.

This completed form must be returned electronically through the Online Document Submission via the Employer Pension and Benefit Information Connection (EPIC) no later than September 16, 2019.