Application for Retirement Allowance
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If you have questions after reading the information included in this packet, call the New Jersey Division of Pensions & Benefits at (609) 292-0909.
Introduction

This package includes the information you need to apply for a Service (mandatory or voluntary), Early, or Deferred Retirement from the Judicial Retirement System (JRS).

You cannot use the included application to apply for a Disability Retirement. To obtain an Application for Disability Retirement, contact the JRS Administrator at (609) 292-0909.

Mandatory Retirement

Retirement is mandatory at age 70 for all members of the JRS. If you do not file a retirement application before age 70, you are automatically retired on your 70th birthday. Retirement benefits, however, are not payable until the application is filed.

Planning For Retirement

Before applying for retirement, it is important to give yourself enough time to review your benefits and options. The JRS Retirement Checklist provides a list of important steps in the retirement process and when they would normally occur.

Among your first actions should be to obtain an Estimate of Retirement Benefits. You may request an estimate of your JRS retirement benefits by writing to the New Jersey Division of Pensions & Benefits, Judicial Retirement System, P.O. Box 295, Trenton, NJ 08625-0295, by calling (609) 292-0909, or by email at: pensions.nj@treas.nj.gov The estimate will provide you with the estimated retirement allowance available and your lump-sum death benefits. If you provide us with the name and birth date of your beneficiary, we will estimate not only the statutory survivor benefits but also alternate payment options.

Members should remember that this is an estimate only. After you apply for retirement, the New Jersey Division of Pensions & Benefits (NJDPB) will send you a Quotation of Retirement Benefits before your retirement becomes effective showing the final figures.

Submitting Your Application

Your Application for Retirement Allowance must be filed with the NJDPB in advance of your retirement date. Processing times vary; three to four months advance filing is recommended. Except for a mandatory Service Retirement at age 70, the earliest effective date is the first of the month following the NJDPB’s receipt of your application.

It is your responsibility to apply for retirement and ensure that all forms you are required to submit are received by the NJDPB within 90 days. Otherwise, your retirement application may be canceled and you will need to submit another application for a future retirement date. Do not give the application to your employer to mail. You should, however, notify your employer of your plans to retire since retirement processing cannot begin until we have received all the necessary information and forms from both you and your employer.

If you have not furnished proof of your age to the NJDPB, you should attach photocopies (not original documents) of your proof of age to your Application for Retirement Allowance. Proof of age for your beneficiary is also required if you select Option A, B, C, D, 2, 3, or 4.

If any proof of age documents are given under a maiden name, please identify them as such. Proof of age documents include a copy of any of the following:

- Birth certificate — with visible seal;
- Passport;
- A U.S. Passport Card;
- A current digital New Jersey driver’s license or identification card (for non-drivers issued by the N.J. Motor Vehicle Commission);
- A current digital Pennsylvania or New York driver’s license; or
- Naturalization or immigration papers.

Unacceptable documentation includes military records indicating your age, expired documentation, out-of-state drivers’ licenses (except P.A. and N.Y.), hospital birth certificates, marriage certificates, census records, baptismal records, or affidavits from older family members.

Your First Retirement Check

The earliest your first retirement check can be paid is the first of the month following your retirement date or when processing has been completed, whichever is later. This is when your retirement becomes due and payable.

If approval of your retirement is delayed, your first check will be retroactive to your effective date of retirement.

If, after applying for retirement, you wish to change your retirement date, change your retirement payment option selection, or cancel your retirement, you must forward written notice to the NJDPB’s Retirement Bureau within 30 days of the effective retirement date. After that time, you cannot change your retirement date or payment option selection.
TYPES OF RETIREMENT

There are several types of retirement to meet your individual needs.

JRS retirements are calculated using a combination of your age at retirement, your total years of judicial service credit and/or non-judicial service credit, and your Final Salary.

Definitions

In the aggregate of public service — your total years of both judicial and non-judicial service credit in the JRS. This would include service transferred into JRS from another New Jersey State-administered retirement system.

Final Salary — the salary on which your JRS pension contributions are based as of the date of your retirement.

Judicial Service — all your years as a judge under the JRS.

Service Retirement

This is the type of retirement for which most members qualify. There are several types of Service Retirement based upon your years of judicial and/or non-judicial service.

Mandatory Service Retirement — Retirement is mandatory at age 70 for all members of the JRS with the effective date of the retirement being your 70th birthday. The annual benefit is calculated using the Service Retirement formula that best matches your total years of judicial service credit and/or non-judicial service credit.

If you do not file a retirement application before age 70, you are automatically retired on your 70th birthday. Retirement benefits, however, are not payable until the application is filed.

Service Retirement with only Judicial Service — If you retire at:

- Age 70 with 10 or more years of judicial service;
- Age 65 or older with 15 or more years of judicial service; or
- Age 60 or older with 20 or more years of judicial service; your annual benefit is calculated at 75 percent × Final Salary.

Service Retirement with Judicial Service and Non-Judicial Service — If you retire at:

- Age 65 or older with 15 or more years in the aggregate of public service of which five or more consecutive years were judicial service; or
- Age 60 or older with 20 or more years in the aggregate of public service of which five or more consecutive years were judicial service; your annual benefit is calculated at 50 percent × Final Salary.

If you retire at age 60 – 64 with 15 or more years in the aggregate of public service of which five or more consecutive years were judicial service, your annual benefit is calculated as follows:

Two percent × Final Salary × number of years of service up to 25 years, plus one percent × Final Salary × number of years of service over 25 years.

If you retire at age 60 or older and do not meet the minimum amounts of service credit listed above, your annual benefit is calculated as follows:

Two percent × Final Salary × number of years of judicial service up to 25 years, plus one percent × Final Salary × number of years of service over 25 years.

Early Retirement

This type of retirement is available to members who have at least 25 years in the aggregate of public service of which five or more consecutive years are judicial service and who are not yet age 60. You receive a retirement based upon the following formula:

Two percent × Final Salary × number of years of service up to 25 years, plus one percent × Final Salary × number of years of service over 25 years.

The retirement benefit will be actuarially reduced for the number of months remaining until you are age 60 to cover the cost of paying your benefit over a longer period of time.
Deferred Retirement

This type of retirement is available to members who are not yet 60 when they terminate JRS-covered employment and have at least 10 years in the aggregate of public service of which five or more consecutive years were judicial service. At age 60 you have a right to a retirement benefit.

Your Deferred Retirement benefit is calculated in the same way as an Early Retirement, taking into account your salary and service when you leave. However, your Deferred Retirement benefit is not actuarially reduced since it is not payable until you reach age 60.

If you are removed from employment for cause on charges of misconduct or delinquency, you are ineligible for Deferred Retirement benefits.

If you die between the time you terminate employment and before your retirement becomes effective, the beneficiary(ies) named on your retirement application will receive the return of your pension contributions plus interest. If you do not file a retirement application with the NJDPB, your last named beneficiary will receive payment. There are no other death benefits under these circumstances.

Your group life insurance coverage is not in effect between the time you terminate employment and the date your Deferred Retirement becomes effective at age 60. You are eligible to convert the difference between the amount of group life insurance coverage you had as an active member and the amount you will have at the time you start to receive retirement benefits. See the Conversion of Group Life Insurance Fact Sheet for more information.

At any time before your Deferred Retirement becomes effective, you may change your mind and apply for withdrawal of your contributions instead. Once you cancel your Deferred Retirement and withdraw your contributions, all the rights to retirement and privileges of membership end.

Those covered by the State Health Benefits Program (SHBP) will not be able to continue that coverage under the SHBP Retired Group if you apply for Deferred Retirement. However, you are entitled to continue coverage in the SHBP Active Group for up to 18 months after termination of employment in accordance with federal Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) legislation. If your retirement allowance becomes due and payable (see the “Your First Retirement Check” section) during the 18 months of extended coverage under COBRA, you would qualify for coverage in the SHBP Retired Group. You must contact the NJDPB to request a SHBP offering letter.
IMPORTANT INFORMATION ABOUT YOUR RETIREMENT

Notifying Your Employer

Your Application for Retirement Allowance must be supported by a copy of your resignation from judicial office that has been filed with the Office of the Secretary of State. Your employer must also submit the Certification of Service and Final Salary. Your retirement cannot be processed until the NJDPB receives this certification.

Continuing Your Health Benefits into Retirement

See your employer about your options for continuing your health coverage into retirement. If you qualify for enrollment into the Retired Group of the SHBP and are retiring under a Service (mandatory or voluntary), Early, or Disability Retirement, you will receive an offering letter from the SHBP one month before your retirement date (members with a Deferred Retirement should see the “Deferred Retirement” section). The transition of health coverage from active employment to retired status must be continuous. A break in coverage may jeopardize your eligibility to be offered continued SHBP coverage into retirement.

Supplemental Annuity Collective Trust (SACT) and the New Jersey State Employees Deferred Compensation Plan (NJSEDCP)

If you are a participant of the SACT or the NJSEDCP, your benefits from these plans are separate. You may call the SACT at (609) 292-7524 or the NJSEDCP at 1-866-NJSEDCP to obtain further information regarding payment options with each of these plans.

Conversion of Group Life Insurance

JRS members are eligible for both Noncontributory and Contributory Group Life Insurance while employed. At retirement, coverage under these life insurance plans is substantially reduced or may be terminated. You have a one-time option to convert any group life insurance coverage that would otherwise end at retirement.

Information on JRS group life insurance benefits at retirement and how to begin the conversion process is included in the Conversion of Group Life Insurance Fact Sheet.

Note: to protect your conversion privilege, it is suggested that you send your application for conversion to Prudential with at least one month's premium at the time you file your retirement application with the NJDPB.
JRS RETIREMENT CHECKLIST

When planning for a successful retirement, it is important to give yourself enough time to review your benefits and options. The time frames in this checklist are a guide. Processing times vary and cannot begin until the NJDPB receives all the necessary information and forms from both you and the Administrative Office of the Courts.

Six to Eight Months Before Retirement

☐ Request an estimate of your JRS retirement benefit by writing to the New Jersey Division of Pensions & Benefits, Judicial Retirement System, P.O. Box 295, Trenton, NJ 08625-0295 or calling (609) 292-0909. The estimate will provide you with the retirement allowances available, and your lump-sum death benefits payable under the Noncontributory Group Life Insurance.

Three to Four Months Before Retirement

☐ Submit an Application for Retirement Allowance to the NJDPB. Be sure to attach a photocopy of your proof of age and that of your beneficiary if not on file. Your retirement processing will be delayed and your retirement allowance will not be paid until the NJDPB receives copies of required birth date evidence.

☐ The amount of your noncontributory life insurance coverage through the pension plan decreases at retirement, or terminates if you have less than 10 years of service credit. You may convert the dollar difference between the group coverage you had before retirement and the group coverage you will have after retirement to a non-group life insurance policy.

☐ If you participated in the JRS optional Contributory Group Life Insurance Program, you will need to consider what you wish to do with your insurance coverage. The Group Term Life Insurance will end at retirement, but you have a guaranteed conversion ability with Prudential like that described above with the noncontributory insurance. If you have the Group Universal Variable Life insurance coverage, it can be continued into retirement by making payments directly to Prudential Insurance Company. Call Prudential at 1-800-524-0542 to make the necessary arrangements for Contributory Group Life Insurance.

☐ Ask the human resources representative of the Administrative Office of the Courts to submit a Certification of Service and Final Salary to the NJDPB.

☐ Contact the NJSEDCP office at 1-866-NJSEDCP or the SACT office at (609) 292-7524 if you participate in these funds to obtain a distribution form.

☐ If you are 65 or older, contact the local Social Security Administration office for full Medicare enrollment. You must be covered by both Part A and Part B of Medicare to be eligible to enroll in the SHBP at retirement.

Approximately Two Months Before Retirement

☐ You will receive a Quotation of Retirement Benefits letter which shows your monthly retirement allowance with:

- A quote of any outstanding loan balance; and
- A notice of any outstanding arrears (purchase) balance and/or shortage. Any outstanding arrears or shortage must be paid before your retirement check can be issued. Failure to respond to this notice will delay your retirement benefits.

☐ You will receive a letter regarding enrollment in the Retired Group of the SHBP if you are currently covered by the SHBP.

Approximately One Month Before Retirement

☐ If you choose to change your retirement date or pension option, or cancel your retirement, you may do so within 30 days of your retirement date. This request must be in writing to the NJDPB. Canceling your retirement does not guarantee reemployment with your employer.

Shortly After Your Retirement Date

☐ You will receive forms for withholding federal and New Jersey State income tax.

☐ You will receive a form to have your retirement check deposited directly to your bank account. Direct deposit of your benefit payment is mandatory (except for foreign mailing addresses).

☐ You will receive a letter summarizing your retirement and noncontributory death benefits. The letter will also supply figures needed in filing your income tax returns.

☐ If you enrolled in the Retired Group of the SHBP, you will receive new identification cards from the health insurance plan you selected.
INSTRUCTIONS FOR COMPLETING
THE APPLICATION FOR RETIREMENT ALLOWANCE

PLEASE READ THESE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS APPLICATION.

PLEASE DETACH THE APPLICATION FROM THE PACKET BEFORE MAILING.

When to File — All retirements (except for a mandatory Service Retirement and Disability Retirement) are effective on the first of the month. File this application with the NJDPB before your retirement date or you will lose benefits. Three to four months advance filing is recommended. You must terminate employment before your retirement date. Mail your completed application to the New Jersey Division of Pensions & Benefits, P.O. Box 295, Trenton, NJ 08625-0295.

Disability Retirement — Do not use this form to file for Disability Retirement. Please contact the JRS Administrator at (609) 292-0909 for a Disability Retirement application.

PART ONE — ACKNOWLEDGEMENT OF TERMS AND CONDITIONS OF RETIREMENT

You must agree to and sign the terms and conditions when applying for retirement. If you fail to sign the acknowledgement, your Application for Retirement Allowance will not be processed.

PART TWO — MEMBER INFORMATION

ITEM 1: MEMBERSHIP NUMBER - Enter your pension fund membership number shown on your annual statement. If you are not sure of your number, contact your human resources representative.

ITEM 2: NAME - Enter your full name.

ITEM 3: ADDRESS - Enter your present mailing address. Report any change of address before you begin receiving a pension to the Retirement Bureau at the address shown on top of the Application for Retirement Allowance. Provide your Social Security number and retirement date in the letter.

ITEM 4: SOCIAL SECURITY NUMBER - Provide your Social Security number.

ITEM 5: DATE OF BIRTH - Enter the month, day, and year of your birth. You should submit a copy of your proof of age if you have not already done so. Do not delay filing the application if this document is not readily available.

ITEMS 6 AND 7: TELEPHONE NUMBERS - Enter your home and work telephone numbers. Include your area code.

ITEM 8: HOME EMAIL ADDRESS - Enter your home email address if you have one.

ITEM 9: DATE OF RETIREMENT - Enter the date you wish to retire. All retirements are effective on the first of a month (except for a mandatory Service Retirement and Disability Retirement). The earliest retirement date available for a Service or Early Retirement is the first of the month following the NJDPB's receipt of your application. For Deferred Retirement, the effective date is the first of the month following your 60th birthday. For a mandatory Service Retirement, the effective date is the date of your 70th birthday. Your application must be received in this office prior to your retirement date. Your first retirement check will be dated no earlier than the first of the month following your retirement date.

ITEM 10: TYPE OF RETIREMENT - Indicate the type of retirement for which you are applying. Note: Mandatory retirement at age 70 is considered a Service Retirement. See the “Types of Retirement” section for definitions

ITEM 11: MARITAL STATUS - Please indicate your marital status.

ITEM 12 THROUGH 14: SPOUSE’S INFORMATION - If you are currently married, enter your spouse’s name, date of birth (month, day, and year), and Social Security number. You should submit a copy of your spouse’s proof of age if you have not already done so. Do not delay filing the application if this document is not readily available. If you are unmarried, widowed, or divorced, enter N/A.

ITEM 15: SPOUSE’S ADDRESS - If you are currently married, enter your spouse’s address if it is different from the address you entered in item 3. If you are unmarried, widowed, or divorced, enter N/A.

ITEM 16: DATE OF MARRIAGE - If you are currently married, enter your date of marriage. If you are unmarried, widowed, or divorced, enter N/A.

Continued on next page
PART THREE — CHOOSE A RETIREMENT PAYMENT OPTION

Mark only one box. If you choose the Maximum Option, you must sign the application in the space indicated to acknowledge your understanding that no monthly benefit — other than the statutory survivor benefit provided under the JRS — is payable to a spouse or other named beneficiary.

Note: If no box is checked, your application cannot be processed.

Note for Maximum Option: The law requires that the NJDPB notify your spouse if you choose the Maximum Option. If you are currently married, please enter your spouse’s name and mailing address (if different than yours) in items 13 and 16. If you are unmarried, widowed, or divorced, enter N/A.

To provide a benefit to a spouse or beneficiary, you may choose one of the following options: A, B, C, D, 1, 2, 3, or 4. See the JRS Survivor Benefits and Pension Options Fact Sheet for an explanation of the available options. Selecting an option other than the Maximum Option will reduce your retirement allowance to provide an additional benefit to a named beneficiary upon your death. The higher your beneficiary’s allowance, the more your allowance will be reduced. Your option selection is irrevocable and cannot be changed under any circumstances once your retirement becomes due and payable (see the “Your First Retirement Check” section).

If you do not understand your options, call the NJDPB for assistance at (609) 292-0909.

RETIREEtMENT OPtION BENEFICIARY - In the previous item, you have chosen the method of payment to both you and, if applicable, a beneficiary. Name your beneficiary for that option here. Please include the beneficiary’s full name, relationship to you (if not related, write “Other”), date of birth, Social Security number, and mailing address.

Please complete this section even if you have chosen the Maximum Option. The beneficiary named in this section will receive any optional benefit you selected above and will also receive any issued, but uncashed, pension checks remaining at your death. If you choose Option A, B, C, D, 2, 3, or 4, please attach a copy of the beneficiary’s birth certificate.

Under Option 1, you may name any person or persons as well as an institution, charity, organization, your estate, etc., as a beneficiary. If you designate an institution, charity, organization, in order to ensure that this designee is a legal entity, we require the beneficiary’s tax identification number.

You may name multiple beneficiaries to share the benefit if you choose Option 1 or Option 4. To name additional beneficiaries, fill out and sign the Additional Pension Option Beneficiaries page provided at the end of this packet, and check the box on the application.

Under Option A, B, C, D, 2, or 3 you may name only one person as a beneficiary.

The designation of beneficiary becomes effective when your Application for Retirement Allowance is received by the NJDPB.

MEMBER’S SIGNATURE AND DATE - Sign and date this page. Your application cannot be processed without your signature.

PART FOUR - DESIGNATION OF CONTRIBUTORY LIFE INSURANCE BENEFICIARIES

(Does not apply to members with less than 10 years of membership credit.) All members of the Judicial Retirement System are covered by group life insurance. JRS members have Noncontributory Group Life Insurance coverage as an active member equal to 1 1/2 x Final Salary. At retirement, your Noncontributory Group Life Insurance is reduced to 1/4 x Final Salary.

You may name any person or persons as well as an institution, charity, organization, your estate, etc., as a Noncontributory Group Life Insurance beneficiary. If you designate an institution, charity, or organization, in order to ensure that this designee is a legal entity, we require the beneficiary’s tax identification number. You may also name multiple beneficiaries for this benefit. You may change your group life insurance beneficiary at any time.

You should name both a primary beneficiary(ies) and a contingent beneficiary(ies) for this benefit. If you find it necessary to use additional sheets to complete this section, write “See attached” in the beneficiary area of the application. The attachments must also be signed and dated.

Primary Beneficiary(ies) - List the full name, relationship to you (if not related, write “Other”), birth date, Social Security number, and address of the individual(s)/entity(ies) you want to receive your Noncontributory Group Life Insurance proceeds. If you name more than one primary beneficiary, the lump-sum Noncontributory Group Life Insurance proceeds will be divided equally among those listed. If you do not wish to divide the proceeds equally, please contact the NJDPB for assistance.

Contingent Beneficiary(ies) - List the full name, relationship to you (if not related, write “Other”), birth date, Social Security number, and address of the individual(s)/entity(ies) you want to receive your Noncontributory Group Life Insurance proceeds should your primary beneficiaries not be living at the time of your death. If you name more than one contingent beneficiary, the lump-
sum insurance proceeds will be divided equally among those listed. If you do not wish to divide the proceeds equally, please contact the NJDPB for assistance.

The designation of beneficiary becomes effective when your Application for Retirement Allowance is received by the NJDPB.

**Note:** The designation of beneficiaries for the JRS optional Contributory Group Life Insurance Program is handled through the Prudential Insurance Company of America. If you participated in the JRS Contributory Group Life Insurance Program, contact Prudential at 1-800-524-0542 for information on how to update your beneficiary information at retirement.

**Note:** The amount by which your group life insurance is reduced at retirement may be converted at retirement to a non-group policy. Conversion must be done within 31 days of the termination of employment. See the *Conversion of Group Life Insurance* Fact Sheet for more information.

**MEMBER’S SIGNATURE AND DATE** - Sign and date this page. Your application cannot be processed without your signature.

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**IF YOU NEED HELP IN COMPLETING THIS APPLICATION, CONTACT THE JRS AT (609) 292-0909**
PART ONE: ACKNOWLEDGEMENT OF TERMS AND CONDITIONS OF RETIREMENT

You must agree to and sign these terms and conditions when applying for retirement. If you fail to sign this acknowledgement your Application for Retirement Allowance will not be processed.

- I understand that I must meet all of the eligibility requirements for retirement and cannot submit an application more than one year before my retirement date (if applying for Deferred Retirement, I may file more than one year in advance upon termination of employment).
- I understand that my employer will be notified that I have filed an application for retirement.
- I understand that if I change or cancel my retirement date and submit a new application with a later retirement date, it is my responsibility to notify my employer to ensure that any active health benefits are not canceled and that my employment remains uninterrupted.
- I understand that changing or canceling my retirement date does not guarantee continued employment with my employer.
- I understand that I cannot make pre-arrangements with my employer to return to employment in any capacity (this does not apply to judges recalled by the Superior Court for temporary service).
- I understand that the beneficiary designation I am indicating on this retirement application supersedes all prior designations, even if my retirement is not yet effective or if I cancel my retirement. The New Jersey Division of Pensions & Benefits (NJDPB) will honor this as my most recent beneficiary designation on file, unless another beneficiary designation is made after the retirement application.
- I understand that if I die prior to the retirement date indicated on this retirement application, any retirement benefits that may be payable to a beneficiary cannot be paid until the retirement date selected.

I have read and agree to the Terms and Conditions of Retirement, have not pre-arranged with my employer to return to employment in any capacity, and attest that the information provided on this application is true and correct.

Member's Signature ___________________________________________ Date __________________
### PART TWO: MEMBER INFORMATION  
(Please print)

1. Membership Number ____________________________________________

2. Name _______________________________________________________________________________________
   Last  First  Middle

3. Address _____________________________________________________________________________________
   Street  Apt No.
   __________________________________________________________
   City  State  Zip

4. Social Security Number ____________________________________ 5. Date of Birth ______________________________
   Month  Day  Year

6. Home Phone (______) __________________________ 7. Work Phone (______) __________________________

8. Home Email Address ___________________________________________

9. Retirement date — **To be effective the first day of**
   __________________________________________
   Month  Year

10. Type of Retirement — Indicate the type of retirement for which you are applying (see the “Types of Retirement” section for definitions).
    - [ ] Service Retirement
    - [ ] Early Retirement
    - [ ] Deferred Retirement

11. Marital Status  
    - [ ] Single
    - [ ] Married
    - [ ] Separated
    - [ ] Divorced

12. Spouse’s Name _______________________________________________________________________________
    Last  First  Middle

13. Spouse’s Social Security Number _____________________ 14. Spouse’s Date of Birth _____________________
   Month  Day  Year

15. Spouse’s Address *(If different from yours)* __________________________
    Street  Apt No.
    __________________________________________________________
    City  State  Zip

16. Date of Marriage _______________________________
    Month  Day  Year

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*Continue to Part Three to select a payment option*
PART THREE: CHOOSE A RETIREMENT PAYMENT OPTION AND NAME A BENEFICIARY

USE THIS PAGE FOR THE MAXIMUM OPTION OR OPTION 1 ONLY — Additional payment options are listed on the following page.

Indicate whether your choice for a method of payment is the Maximum Option or Option 1. Maximum Option and Option 1 beneficiaries share the benefit equally. Refer to the JRS Survivor Benefits and Pension Options Fact Sheet for an explanation of each option. You will receive a monthly retirement allowance for your lifetime, regardless of which option you choose. Choosing an option other than the Maximum will reduce your retirement allowance. You cannot change your payment option once your retirement becomes due and payable (see the “Your First Retirement Check” section).

MARK ONLY ONE BOX.

☐ MAXIMUM OPTION — NO PENSION BENEFIT TO BENEFICIARY — Largest allowance paid to you with no pension benefit paid to a named beneficiary upon your death. ___________________________________________ (You must sign here if choosing this option)

☐ OPTION 1 - REDUCING RETIREMENT RESERVE TO A BENEFICIARY — Your named beneficiary receives the balance of a reserve set up to pay your retirement allowance if you die before the reserve is depleted. You can name more than one beneficiary and you can change your beneficiary(ies) at any time after retirement.

NAME A RETIREMENT OPTION BENEFICIARY (OR BENEFICIARIES) FOR THE MAXIMUM OPTION OR OPTION 1

PRIMARY INSURANCE BENEFICIARY(IES)

<table>
<thead>
<tr>
<th>BENEFICIARY NAME</th>
<th>RELATIONSHIP</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. __________________________</td>
<td>__________________________</td>
<td>_______________</td>
<td>__________________________</td>
</tr>
</tbody>
</table>
| ADDRESS
|
| 2. __________________________ | __________________________ | _______________ | __________________________ |
| ADDRESS

CONTINGENT INSURANCE BENEFICIARY(IES) — If no primary beneficiary is living at my death, payment is to be made to:

<table>
<thead>
<tr>
<th>BENEFICIARY NAME</th>
<th>RELATIONSHIP</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. __________________________</td>
<td>__________________________</td>
<td>_______________</td>
<td>__________________________</td>
</tr>
</tbody>
</table>
| ADDRESS
|
| 2. __________________________ | __________________________ | _______________ | __________________________ |
| ADDRESS

(Attach additional sheets for three or more beneficiaries. Additional sheets must be signed and dated.)

I attest that the information provided on this application is true and correct.

Member’s Signature ___________________________ Date ____________________

Sign this page if selecting the Maximum Option or Option 1 and then continue to Part Four. Otherwise, continue to Part Three on the next page for additional payment options.
PART THREE: CHOOSE A RETIREMENT PAYMENT OPTION AND NAME A BENEFICIARY (CONTINUED)

If you did not select the Maximum Option or Option 1, indicate your choice on this page for method of payment. Refer to the JRS Survivor Benefits and Pension Options Fact Sheet for an explanation of each option. You will receive a monthly retirement allowance for your lifetime, regardless of which option you choose. Choosing an option other than the Maximum will reduce your retirement allowance to provide a monthly benefit to a beneficiary upon your death. The higher your beneficiary’s allowance, the more your allowance will be reduced. You cannot change your payment option once your retirement becomes due and payable.

Under Options A, B, C, or D, you can name only one beneficiary and you cannot change your beneficiary after retirement. If your beneficiary dies before you, your retirement allowance will increase to the Maximum Option.

- **OPTION A - 100 PERCENT TO BENEFICIARY - INCREASE TO MAXIMUM OPTION** — Upon your death, your named beneficiary receives a lifetime monthly retirement allowance equal to 100 percent of your monthly allowance.
- **OPTION B - 75 PERCENT TO BENEFICIARY - INCREASE TO MAXIMUM OPTION** — Upon your death, your named beneficiary receives a lifetime monthly retirement allowance equal to 75 percent of your monthly allowance.
- **OPTION C - 50 PERCENT TO BENEFICIARY - INCREASE TO MAXIMUM OPTION** — Upon your death, your named beneficiary receives a lifetime monthly retirement allowance equal to 50 percent of your monthly allowance.
- **OPTION D - 25 PERCENT TO BENEFICIARY - INCREASE TO MAXIMUM OPTION** — Upon your death, your named beneficiary receives a lifetime monthly retirement allowance equal to 25 percent of your monthly allowance.

Under Options 2, 3, and 4, you cannot change your beneficiary after retirement. Options 2 and 3 pay you a larger monthly retirement allowance than the corresponding Options A and C. However, under Options 2 and 3, if your beneficiary dies before you, you continue to receive the reduced allowance provided by that option.

- **OPTION 2 - 100 PERCENT TO BENEFICIARY - PERMANENT REDUCTION** — You can name only one beneficiary. Upon your death, your named beneficiary receives a lifetime monthly retirement allowance equal to 100 percent of your monthly allowance.
- **OPTION 3 - 50 PERCENT TO BENEFICIARY - PERMANENT REDUCTION** — You can name only one beneficiary. Upon your death, your named beneficiary receives a lifetime monthly retirement allowance equal to 50 percent of your monthly allowance.

**RETIREMENT OPTION BENEFICIARY** — For Options A, B, C, D, 2, and 3 you may list only one beneficiary.

<table>
<thead>
<tr>
<th>BENEFICIARY NAME</th>
<th>RELATIONSHIP</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY NUMBER</th>
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- **OPTION 4 - CHOICE OF AMOUNT TO BENEFICIARY - PERMANENT REDUCTION** — You can name one beneficiary or multiple beneficiaries. Upon your death, your named beneficiary(ies) receives a lifetime monthly retirement allowance indicated.

**OPTION 4 BENEFICIARIES** (Attach an additional sheet for three or more beneficiaries. Additional sheets must be signed and dated.)

<table>
<thead>
<tr>
<th>BENEFICIARY NAME</th>
<th>RELATIONSHIP</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY NUMBER</th>
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ENTER AMOUNT $______________ (Can be no more than the Option 2 allowance.)

2._________________________ _________________  _______________   _____________________________

ADDRESS

ENTER AMOUNT $______________ (Can be no more than the Option 2 allowance.)

I attest that the information provided on this application is true and correct.

Member’s Signature____________________________________________________ Date ____________________
PART FOUR: DESIGNATION OF NONCONTRIBUTORY GROUP LIFE INSURANCE BENEFICIARY(IES)

Only those members with 10 or more years of membership credit are covered by Noncontributory Group Life Insurance at retirement. This section is to be used to name a beneficiary(ies) for your Noncontributory Group Life Insurance, if any. Please be sure to name both a primary and contingent beneficiary(ies). Complete this section even if the beneficiary you name is the same as in Part Three. This designation becomes effective when received by the NJDPB.

<table>
<thead>
<tr>
<th>PRIMARY INSURANCE BENEFICIARY(IES)</th>
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</thead>
<tbody>
<tr>
<td>BENEFICIARY NAME</td>
<td>RELATIONSHIP</td>
<td>BIRTH DATE</td>
<td>SOCIAL SECURITY NUMBER</td>
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</table>

<table>
<thead>
<tr>
<th>CONTINGENT INSURANCE BENEFICIARY(IES) — If no primary beneficiary is living at my death, payment is to be made to:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BENEFICIARY NAME</td>
<td>RELATIONSHIP</td>
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I attest that the information provided on this application is true and correct.

Member's Signature _____________________________ Date ____________________

Return this application to:
New Jersey Division of Pensions & Benefits
P.O. Box 295
Trenton, NJ 08625-0295