



REQUEST TO SUPERINTENDENT OF PENSIONS FOR WRITTEN NOTICE
Section 21.4 of The Pension Benefits Act of Manitoba and Sections 10.52 – 10.58 of the Regulation

APPLICANT INFORMATION

All fields must be completed

_____		_____	
First Name		Last Name	

Address			
_____		_____	_____
City		Province/State	Postal/Zip Code
_____/_____/_____		_____	
Date of Birth (Day/Month/Year)		Social Insurance Number	
_____		_____	
Transfer Amount		Request Date	

AUTHORIZED ADMINISTRATOR'S CONTACT INFORMATION

Once the request has been reviewed, the Superintendent's response will be provided directly to the authorized administrator

Name of Authorized Administrator (Name of Financial Institution or Pension Plan):		

Address		
_____	_____	_____
City	Province	Postal Code
_____	_____	_____
Contact Name	Phone Number	Ext

E-mail Address		

ADDITIONAL ADMINISTRATOR INFORMATION

To be completed if the applicant is transferring funds from more than 1 administrator

Name of Administrator (Name of Financial Institution or Pension Plan):		

Address		
_____	_____	_____
City	Province	Postal Code

Name of Administrator (Name of Financial Institution or Pension Plan):		
Address		
City	Province	Postal Code

Name of Administrator (Name of Financial Institution or Pension Plan):		
Address		
City	Province	Postal Code

Name of Administrator (Name of Financial Institution or Pension Plan):		
Address		
City	Province	Postal Code

The information provided on the request form will be used to determine whether or not the applicant has previously made a one-time transfer. If the request is missing information, verification will be delayed as the Office of the Superintendent – Pension Commission (OSPC) will have to contact the authorized administrator to provide the missing information.

Once the request has been reviewed, a response will be provided directly to the authorized administrator, as indicated on the request.

If the applicant is transferring funds from two or more plans, not all of which are administered by the same administrator, the authorized administrator must provide a copy of the superintendent's response to each of the administrators.

The administrator may rely on the Superintendent's notice only for the proposed transfer in respect of which the notice was given.

This request must be mailed to the OSPC at the address indicated below. Originals should not be mailed as this request will not be returned to the Authorized Administrator.

**Office of the Superintendent – Pension Commission
1004 – 401 York Ave.
Winnipeg, MB R3C 0P8**