

## **Locked-In Transfer Agreement**

Name of Transferring Registered Pension Plan:	Carleton University Retirement Plan
Name of Transferring Participant:	
ID Number of Transferring Participant:	
Name of Financial Institution/Carrier or Recipient Plan Administrator (the "Recipient"):	
Account No. (LIRA or LIF Number) or Policy No.:	
Address of Recipient to whom the transfer cheque should be forwarded	

The Recipient understands that:

- The Transferring Participant is a terminated member of the Plan;
- The Plan is regulated by the Pension Benefits Act of Ontario and its Regulations (the "Act");
- The Plan provides that a terminated member's pension entitlements which are vested may be transferred to another registered pension plan or to a retirement savings arrangement as prescribed under the Act on the condition that all funds will be "locked-in" and administered in accordance with the Act and the Income Tax Act (the "ITA");
- The above-stated Participant has requested a transfer of funds under such condition;
- The earliest date for receipt of pension benefits under the Plan is the earlier of age 55 or 10 years prior to normal retirement date which is the first date of July nearest the Participant's 65<sup>th</sup> birthday;
- The commuted value of the pension benefit payable under this Plan is determined on a basis which does not differentiate on the basis of sex.

The undersigned, being a representative of the Recipient, confirms and agrees on behalf of the Recipient:

- 1. We have allocated to this Transferring Participant the Account Number or Policy Number shown above (if applicable),
- 2. We agree to accept the funds available for transfer for this Transferring Participant to be credited to his/her account,
- 3. We agree to "lock-in" and administer the amount transferred in the manner required by the ITA and the Act,
- 4. We will not permit any subsequent transfer, commutation or withdrawal of transferred money, including earnings thereon, except where such transfer, commutation or withdrawal complies with the requirements of the ITA and the Act,
- 5. We agree that no money transferred, including earnings thereon, will be assigned, charged, anticipated or given as security except as permitted by subsection 65(3) of the Act,



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- 6. We acknowledge that any transaction purporting to assign, charge, anticipate or give as security money transferred, including earnings thereon, except as permitted by subsection 65(3) of the Act, is void,
- 7. On the death of the Transferring Participant, the Recipient will administer the money in accordance with the Act and the ITA and all applicable law,
- 8. The person signing below is authorized to execute this Agreement on behalf of the Recipient.

Unless this Agreement is fully completed and returned to Human Resources, Carleton University, 1125 Colonel By Drive, Ottawa, Ontario, K1S 5B6, no transfer of funds will occur.	
Signature of Authorized Signing Officer	Title
Name of Authorized Signing Officer (print)	Date signed