



MONROE COUNTY EMPLOYEES RETIREMENT SYSTEM

APPLICATION FOR DEFERRED SERVICE STATUS

RETURN TO:	Monroe County Employees Retirement System 840 South Roessler Street Monroe, MI 48161 Phone: (734) 241-1174 · Fax: (734) 241-4722
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PLEASE TYPE OR PRINT. SEND COMPLETED APPLICATION TO ADDRESS ABOVE.

Name (Last, First, Middle)		Social Security No.*		Date of Birth (MM,DD,YYYY)	
Street Address			City, State, Zip Code		Home Phone No. ()
Department Name	Member No.	Last Day Paid For	Union Affiliate	Years of Service Credit	
<p>In accordance with Section 7.5 of the MCERS Plan Document, I wish to remain a member of the Monroe County Employees' Retirement System for the exclusive purpose of applying for and receiving a service retirement allowance upon satisfaction of the requirements in effect at the time of my termination of employment.</p> <p>I understand it is my responsibility to keep MCERS informed of address changes. I understand MCERS will attempt to contact me before I am eligible to begin receiving a retirement allowance to have the required documents completed. I understand it is my responsibility to make certain that these documents are completed and my allowance begins when I am eligible.</p>					
Signature of Member			Date		
Signature of Witness			Date		
PLEASE ENCLOSE COPY OF BIRTH CERTIFICATE, SPOUSE BIRTH CERTIFICATE AND MARRIAGE LICENSE (IF APPLICABLE)			Date Approved by Retirement Board		
NOTE: IF YOU HAVE A CHANGE OF ADDRESS, NOTIFY THE RETIREMENT OFFICE IMMEDIATELY.					

*Protected information required for tax and actuarial purposes.