

L1011

Request for Pension Actuarial Valuation upon Marriage Breakdown

Note: This is an interactive form. Please save this form to a local drive prior to entering your information.

Please complete the information and return to Westcoast Actuaries Inc. via one of the following:

Email:
legal-reports@westcoast-actuaries.com

Mail:
Actuarial Evidence Team
Westcoast Actuaries Inc.
908 - 1166 Alberni Street
Vancouver, BC
V6E 3Z3

Fax:
Actuarial Evidence Team
Westcoast Actuaries Inc.
(604) 730-1886
1-855-730-1886

If you require further information or assistance, please do not hesitate to contact us.

1 - Checklist of Required Documentation

Please provide the following documents for each plan. Note that our standard turnaround time to perform a valuation is 2 to 3 weeks from when we receive all required information.

Applicable in All Cases

- Completed L1011 - Request for Pension Actuarial Valuation form
- Most recent annual pension statement
- Recent paystub (if Active)
- Retirement/termination forms (if Retired or Terminated)

B.C. Public Sector Pension Plans (Municipal, Public Service, College, Teachers', and WorkSafe BC)

- Person Profile^(a)

(a) The Annual Member Benefit Statement does not provide sufficient details on the member's pension plan participation for valuation purposes. A Person Profile must be requested from the [Pension Corporation](#).

Royal Canadian Mounted Police (RCMP) and Federal Public Sector Pension Plans

- Plan text / member information booklet
- Pension Benefits Division Act (PBDA)
Pension Benefits Report^(b)

(b) Information about the division of benefits package is available on the [Government of Canada website](#). Please complete the Request for Pension Benefits Division Information form and submit to [Public Works and Government Services Canada](#) (PWGSC).

For All Other Plans

- Plan text / member information booklet
- Pensionable earnings history
- Pensionable service history
- Pension plan's past pension indexing history

2 - Personal Information

Please note that all fields are required unless noted otherwise. Please complete in full, and contact us if you have any questions.

2.1 - Member Information

Legal First Name

Legal Last Name

Gender

Male Female

Date of Birth (mmmm dd, yyyy)

Life Expectancy

Normal Sub-Normal

If Sub-Normal, Please Specify

2.2 - Spouse Information

Legal First Name

Legal Last Name

Gender

Male Female

Date of Birth (mmmm dd, yyyy)

Life Expectancy

Normal Sub-Normal

If Sub-Normal, Please Specify

2.3 - Member Employment Information

Member Status

Active Retired Terminated
 Disabled Other

If Other, Please Specify

Member Work Status (if applicable)

Full-time Part-time Other

If Part-time or Other, Please Specify

Member's Current Pensionable Salary (if applicable)

Effective Date of Current Salary (if applicable) (mmmm dd, yyyy)

2.4 - Retirement/Termination Information

This section is required only for members who are either retired or terminated. Please complete, if applicable.

Date of Retirement/Termination (mmmm dd, yyyy)

Pre-65 Pension Amount (if retired)

Post-65 Pension Amount (if retired)

Form of Pension Elected (if retired)

Single Life Joint Survivor _____ %

Guarantee Period (if retired)

3 - Matrimonial Division Information

3.1 - Marriage Information

Date of Cohabitation^(c) (m m m m dd, yyyy)

Date of Marriage (m m m m dd, yyyy)

Date of Separation (m m m m dd, yyyy)

Date of Valuation^(d)

Current Date. This is our default and recommended Date of Valuation.

Check this box only if a specific Date of Valuation is agreed upon. Please specify.

_____ (m m m m dd, yyyy)

(c) Enter a Date of Cohabitation only if you wish to use this date as the start of the marriage-like/common-law period for pension division purposes.

(d) Date of Valuation:

Per our standards, we will use a Date of Valuation as at the end of the month the valuation will be completed in. The Date of Valuation is usually a future date to represent when the parties will separate their assets by way of mediation or trial. If another date is specified, we may request for applicable supporting documentation.

Note that only service accrued within the marriage-like/common-law period will be used for valuation purposes.

3.2 - Valuation Information

Name of Pension Plan

Reporting Format^(e)

Full Written Report Summary Report^(f)

Teleconference Recording Requested^(g) (if applicable)

Yes No

Division Type for Valuation Purposes^(h)

Within the Plan / Plan-administered Split
 Outside the Plan / Compensation Payment
 Both⁽ⁱ⁾

Prepayment Enclosed^(j)

Yes No

(e) The Full Written Report fully complies with both court standards and our professional standards as an expert report for legal evidence purposes. However, the Summary Report is usually a sufficient option when division is relatively amicable.

(f) The Summary Report includes a complimentary teleconference session with one of our Consulting Actuaries to discuss the results provided.

(g) We can provide a recording of the teleconference through our teleconference provider. The fee to request this recording is \$50 plus tax.

(h) For more information regarding the differences between the two division methods, please refer to an article on our website [here](#).

(i) Additional fees will apply. Please contact us for further information regarding the additional fees.

(j) Prepayment is required if the valuation is requested by the pension holder or the spouse. Prepayment can be made by cheque or credit card. Please contact us if prepayment is to be made by credit card.

4 - Contact Information & Disclaimer

4.1 - Contact Information

I am the

- Member Member's Spouse Mediator
 Counsel to the Member Counsel to the Member's Spouse

I am

- Retaining Westcoast Actuaries Inc. on a single-retainer basis
 Retaining Westcoast Actuaries Inc. on a joint-retainer basis

Salutation

- Mr. Ms.

Law Firm Name (if applicable)

First Name

Address

Last Name

City

Email

Province

Phone Number

Postal Code

4.2 - Disclaimer

I understand that all pension valuations are completed in line with the Canadian Institute of Actuaries' Standards of Practice for Actuarial Evidence and applicable provincial legislation.

I hereby engage Westcoast Actuaries Inc. for their pension valuation services and agree to pay Westcoast Actuaries Inc.'s fees. Prepayment, where applicable, will be made in advance of the start of all related services.

Print Legal Name

Signature

Date (mmmm dd, yyyy)



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