

## Waiver of AVC Spousal Survivor Benefits

**IMPORTANT: Read this information page before signing the *Waiver of AVC Spousal Survivor Benefits* form.**

Terms shown in bold italic type are defined at the end of this document. Where this document uses *you* or *your*, it assumes you are a member of the OMERS Primary Pension Plan ("OMERS Plan" or "Plan") and you participate in the Additional Voluntary Contributions (AVC) provision.

The *Waiver of AVC Spousal Survivor Benefits* form does not apply to the defined benefit provision of the OMERS Plan. Instead, use OMERS Form 150, Form 151a or Form 151b, as applicable to your situation.

For information about making a claim for survivor benefits, the calculation and/or timing of a payment, or other questions, visit [www.omers.com](http://www.omers.com) or contact OMERS.



### Introduction

If an OMERS Plan member dies and that member is participating in the AVC provision of the OMERS Plan, a refund of the member's AVC account balance may be payable to one or more people or to the member's estate according to the *order of entitlement* set out in the AVC provision of the OMERS Plan.

#### What is the "order of entitlement" for the AVC provision of the OMERS Plan?

The OMERS Plan defines an order of entitlement so that a refund of a member's AVC account balance is paid in the following order of priority:

1. To the person who qualifies as the member's ***eligible spouse*** on the member's date of death.
2. To the member's living designated beneficiary(ies).
3. To the member's estate.

#### If I die and my spouse has not signed a waiver, what benefits are payable to my spouse under the AVC provision of the OMERS Plan?

If the *Waiver of AVC Spousal Survivor Benefits* form has not been signed before your death, your ***eligible spouse*** will automatically receive a refund of your AVC account balance.

#### Who signs the waiver and what does it mean to sign the waiver?

Your ***eligible spouse*** may waive all rights to receive a refund of your AVC account balance by submitting a *Waiver of AVC Spousal Survivor Benefits* form to OMERS. This form requires only your spouse to sign it, and it must be witnessed. Your beneficiary(ies) and estate may not waive survivor benefits.

If a valid waiver form is submitted to OMERS, the next person(s) in the order of entitlement may become eligible for a refund of your AVC account balance.

#### If my spouse submits a *Waiver of AVC Spousal Survivor Benefits* form, who is next in line for survivor benefits?

1. Your living designated beneficiary(ies).
2. Your estate.

#### Can a waiver be cancelled?

Your spouse can cancel the waiver by delivering a written and signed notice to OMERS at any time before your death.

## What if I name my spouse on my beneficiary designation form and my spouse has signed a *Waiver of AVC Spousal Survivor Benefits* form?

A *Waiver of AVC Spousal Survivor Benefits* form waives the right for your eligible spouse to receive a refund of your AVC account balance, but it does not apply to benefits payable to a *beneficiary*. So, if your spouse is also named on your beneficiary designation form, your spouse may still receive a refund of your AVC account balance. If you want to change your beneficiary designation, use *OMERS Form 206 - Beneficiary Information*, available at [www.omers.com](http://www.omers.com).

### ► Definitions

#### **Eligible spouse**

For the AVC provision of the OMERS Plan, an *eligible spouse* is the person who was the member's *legal spouse* or *common-law spouse* immediately before the date of the member's death.

#### **Legal spouse**

OMERS considers a *legal spouse* to be a person who is legally married to the member.

#### **Common-law spouse**

OMERS considers a common-law spouse to be a person who is not married to the member but is living together in a conjugal relationship;

- continuously, for a period of not less than three years; or
- in a relationship of some permanence, if they are the parents of a child as set out in section 4 of the *Children's Law Reform Act*

#### **Living separate and apart**

Whether two persons are *living separate and apart* is often complicated to assess. It is a question of both fact and law and must be determined on a case-by-case basis. The determination may require the assistance of a lawyer. In general, physical separation is usually, but not always, an indication that two persons are living separate and apart. However, physical separation is not always conclusive. There must also be a mutual or a unilateral intention for two persons to live separate and apart and end the marriage or common-law relationship. For example, a physical separation between two spouses caused by one of them living in a nursing home will not necessarily result in a determination that the spouses are living separate and apart, provided that both spouses intended the marriage or common-law relationship to continue despite the physical barrier.

### ► Questions

For information about your options when withdrawing funds from your AVC account, see the booklet *Consider the AVC Option* and the Terms of Participation, available online at [www.omers.com](http://www.omers.com), or contact OMERS - our specially trained staff can answer your questions.

**Note:** Only members who are resident in Canada can make automatic contributions or fund transfers to an AVC account. If you become a non-resident of Canada, your funds can stay in your AVC account but no further funds can be added.



# Waiver of AVC Spousal Survivor Benefits

Your eligible spouse (legal spouse or common law spouse) has first priority to receive spousal survivor benefits under the Additional Voluntary Contribution (AVC) provision of the OMERS Primary Pension Plan (OMERS Plan) in the event of your death. Your spouse can use this form to waive that right. This form does not apply to the defined benefit provision of the OMERS Plan.

Your spouse should read this form carefully before signing it, and also review the *Waiver of AVC Spousal Survivor Benefits Information Sheet* which explains the meaning of the underlined terms above. Note that you as the member do not have to sign this form; it requires signatures only from your spouse and a witness.

This form will be valid only if it is completed, signed and delivered to OMERS before your death. Your spouse should keep a copy of the form and provide the original to OMERS.

To help us serve you better, submit your documents quickly and securely using your myOMERS account. Go to secure communications, start a new conversation, attach your files, and submit.

Any personal information provided on this form may be used to update your membership profile.

Providing OMERS with your personal information is considered consent for its use and disclosure for the purposes set out in our Privacy Statement, as amended from time to time. You can find out more about our collection, use, disclosure and retention of personal information by reviewing our Privacy Statement at [www.omers.com](http://www.omers.com).

## SECTION 1 - MEMBER INFORMATION

OMERS Membership Number*				Date of Birth (m/d/y)	
First Name		Middle Name		Last Name	
Apt/Unit	Address		City	Province	Postal Code
Home Number		Mobile Number		Email	

\*Your membership number appears on your Pension Report or any personalized statement from OMERS.

## SECTION 2 - SPOUSE INFORMATION

First Name		Middle Name		Last Name	
Apt/Unit	Address		City	Province	Postal Code
Home Number		Mobile Number		Email	

## SECTION 3 - WAIVER

Name of member's spouse  
I,  (referred to below as the "spouse"), am the spouse (within the meaning of the *Pension Benefits Act*) of  
Name of member  
 (referred to below as the "member"), who participates in the Additional Voluntary Contribution (AVC) provision of the OMERS Primary Pension Plan (OMERS Plan).

I understand that the OMERS Plan provides that an eligible spouse is entitled to receive a refund of the member's AVC account balance upon the member's death, whether the member's death occurs before or after retirement, provided that the member and spouse were not living separate and apart on the date of the member's death.

I further understand that I may waive my right to receive a refund of the member's AVC account balance that is payable to an eligible spouse, as provided for under the terms of the AVC provision of the OMERS Plan, by signing this waiver.

I understand that if I sign this waiver, I will not receive a refund of the member's AVC account balance that is payable to an eligible spouse upon the member's death. Instead, a payment of this benefit will be made to either:

- a) the beneficiary designed by my spouse; or
- b) the personal representative of my spouse for distribution as part of his or her estate.

**By signing this waiver in the presence of a witness, I hereby waive my right to receive a refund of the member's AVC account balance that is payable to an eligible spouse.**

I understand that I may cancel this waiver at any time prior to the date of the member's death.

Dated this  day of ,  .  

daymonthyear

Signature of Witness

Signature of Member's Spouse

Name of Witness (printed)

Address of Witness (printed)

**Prior to submitting this form, you should consider obtaining independent legal advice concerning your individual rights and the effect of this waiver.**