

State of New Jersey
Department of the Treasury
Division of Pensions and Benefits
PO Box 295, Trenton, NJ 08625-0295

CHANGE RETIREMENT APPLICATION

These changes can only be made before the retirement is due and payable.

If you are applying for a *disability retirement*, and it has been approved by the Board of Trustees, you cannot cancel your retirement or withdrawn, cancel, or amended your application.

Check one:

- Public Employees' Retirement System
- Teachers' Pension and Annuity Fund
- Police and Firemen's Retirement System
- State Police Retirement System

Membership Number _____ Social Security Number _____

Name _____

Address _____

Check here if this is a new address.

I previously filed an *Application for Retirement Allowance* with the Division of Pensions and Benefits.

I wish to make the following change to that application (check boxes that apply):

Change Retirement Date — I wish to change the effective date of my retirement from:

_____ to _____ (May be any first of the month after the receipt date of the original *Application for Retirement Allowance*. Your employer must complete the salary certification on the back of this form.)

Change Retirement Type — I wish to change the type of my retirement from:

_____ to _____ (to change to a disability retirement you must complete an *Application for Disability Retirement*).

Change Option Selection (PERS & TPAF only) — I wish to change my option selection from:

_____ to _____. I understand that the beneficiaries on file with the Division of Pensions and Benefits will remain in force unless I submit a *Designation of Beneficiary* form along with this application. I understand that once my retirement is due and payable, no further change in option will be permitted. My signature indicates that I understand that if I choose the Maximum Option, there are no pension benefits payable to my spouse or other beneficiary.

Cancel Retirement — I wish to cancel my retirement which was to be effective on.

_____. I will continue in employment. (Canceling your retirement does not guarantee reemployment with your employer.) I understand that this application cannot be reinstated and that I must file a new *Application for Retirement Allowance* when I apply for a future retirement date. I further understand that the beneficiaries designated on my retirement application will remain in effect until I change them by submitting a new *Designation of Beneficiary* form or a new *Application for Retirement Allowance*.

Signature

Date

