

### CHECKLIST

### PUBLIC SERVICE SUPERANNUATION PLAN RETIREMENT APPLICATION

**YOU MUST NOTIFY** your HR Consultant/Employer of your intent to retire.

 SEND THE FOLLOWING DOCUMENTS TO:

 Nova Scotia Pension Services Corporation, PO Box 371, Halifax, NS B3J 2P8

 Application for Service Pension (signed & dated).

 Your proof of birth - Photocopy of your Birth Certificate, Passport or Driver's License.

 \*Other documents may be accepted; please contact our office for more details.

 Your spouse's (legal, domestic partner or common-law) proof of birth, if applicable.

 Photocopy of your Marriage Certificate or Declaration of Domestic Partnership Certificate, if applicable.

 If you are legally divorced, please provide a copy of your court order, if not already provided.

 Direct Deposit Form (completed)

 Income Tax Forms - TD1 Federal and TD1 Provincial (Completed)

 \*For maximum income tax deduction, choose only the Basic Personal Amount on each form.

Member Information Form (Completed)



NS Pension Services Corporation 1-800-774-5070 toll free in NS (902) 424-5070 local (902) 424-0662 fax e-mail: info@nspension.ca www.novascotiapension.ca



### NOVA SCOTIA PUBLIC SERVICE SUPERANNUATION PLAN

### **APPLICATION FOR A SERVICE PENSION**

### Plan Member Identification PLEASE PRINT

SURNAME:			VEN NAME(S):					
SOCIAL INSURANCE NUMBER:	TELEPHONE #:				Y/MO/YEAR):			
MAILING ADDRESS Line 1 – NO. & STREET/PO BOX:				E-MAIL ADDRESS:				
MAILING ADDRESS Line 2 – NO. & STREET/PO BO	DX:	CITY/TO	WN:		PROVINCE:	POSTAL CODE:		
PROPOSED RETIREMENT DATE:								

### Identification of Spouse and Dependent Children Under Age 25 and Eligible Overage Dependants PLEASE PRINT

#### NOTE – With this application you <u>must</u> provide:

- 1. A photocopy of your birth certificate or passport; and
- 2. If you are married you must provide a photocopy of your Marriage Certificate, as well as a photocopy of your spouse's Birth Certificate or passport.
- 3. If you are in a domestic partnership, you must provide a photocopy of your Certificate of Domestic Partnership, as well as a photocopy of your partner's Birth Certificate or passport.

SPOUSE'S SURNAME:		SPOUSE'S GIVEN NAME(S):					
SPOUSE'S DATE OF BIRTH (DAY/MO/YEAR):	SPOUSE'S SOCIAL INS	URANCE NUMBER:	DATE OF MARRIAGE (DAY/MO/YEAR):				
CHILD #1 SURNAME:	1	CHILD #1 GIVEN NAME(S):					
CHILD #1 DATE OF BIRTH (DAY/MO/YEAR):		CHILD #1 SOCIAL INSURA	NCE NUMBER:				
CHILD #2 SURNAME:		CHILD #2 GIVEN NAME(S):					
CHILD #2 DATE OF BIRTH (DAY/MO/YEAR):		CHILD #2 SOCIAL INSURA	NCE NUMBER:				
CHILD #3 SURNAME:		CHILD #3 GIVEN NAME(S):					
CHILD #3 DATE OF BIRTH (DAY/MO/YEAR):		CHILD #3 SOCIAL INSURA	NCE NUMBER:				

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Signature of Applicant





NS Pension Services Corporation 1-800-774-5070 toll free in NS (902) 424-5070 local (902) 424-0662 fax e-mail: info@nspension.ca www.novascotiapension.ca Office Use Only

### **Direct Deposit Form**

Nova Scotia Pension Services Corporation requires that all pensions be paid through direct deposit which will automatically credit your Canadian bank account with the net amount of your pension payment each month.

**Note:** All personal information, including banking, is protected by our Corporate Privacy Policy. It is important that you advise us in writing of any change in your banking details. Failure to do so may impact payment of your pension.

Pension payments must be deposited to an account of which you are the account holder, and your name must be clearly identified on your void cheque or direct deposit/pre-authorized credit form from your bank.

**Instructions:** Please complete the section below and return the completed form with a **void cheque** or **direct deposit/pre-authorized credit form** from your bank to the address noted below.

Address: Nova Scotia Pension Services Corporation, PO Box 371, Halifax, NS B3J 2P8

I hereby authorize the Nova Scotia Pension Services Corporation to use this information to deposit my monthly pension benefit.

Name:	Date of Birth:
Mailing Address:	Phone Number:
X	
Signature of Pensioner	Date

pension

## Member Information Form

Office Use Only

# *Please complete this form upon Plan enrolment and/or to correct or change information, including information on annual statements.*

- Complete the Member Identification section. If you are an active employee, please contact your employer for corrections or updates to personal data, including name, address, phone number and e-mail. If you are retired, please contact the Nova Scotia Pension Services Corporation, 1-800-774-5070 toll free in NS, 902-424-5070 local.
- 2. Make any adjustments to your eligible survivors in Section 2.
- 3. For optional changes to your beneficiary information, please see the reverse side of this page.
- 4. Return form to: Nova Scotia Pension Services Corporation, PO Box 371, Halifax, NS B3J 2P8 Email: info@nspension.ca | Fax: 902-424-0662

### **Section 1 - Member Identification** (PLEASE PRINT CLEARLY)

LAST NAME	GIVEN NAME(S)		D	D	М	М	Y	Y	Y	Y
		DATE								
		OF								
		BIRTH:								
MEMBER ID (optional):	SIN (optional):	PROFESS	SIONAI	_#(Te	eache	rs only	<b>y</b> ):			

### Section 2 - Identification of Eligible Survivors: Spouse and Children

Upon your death a pension is automatically made payable to the following persons in this order:

- 1. Spouse, and children if any; if no spouse, then to children;
- If no spouse or children, then to a related person who was dependent on you by reason of mental or physical infirmity. NOTE - Children who are automatically eligible to receive a survivor pension are: children up to 18 years of age; and between 18 and 25 years of age if they are in continuous full-time attendance at a recognized educational institution.

### Identification of Eligible Spouse

Check√one:	Single 🗌	Married	Common-law Partner	Separated	Widow 🗌	Domestic Partnership

Divorced – Please forward a copy of the court order or divorce decree.

#### Domestic Partner Terminated – Please forward a copy of the Termination of Domestic Partnership Certificate.

LAST NAME		GIVEN NAME(S)									
SIN (optional):	GENDER		DATE OF BIRTH	D	D	М	М	Y	Y	Y	Y
Address same as Plan Member											
MAILING ADDRESS			CITY/TOW	/N		PRO	VINCE		POSTA	L COD	E

Identification of Eligible Children (If you would like to ensure that your children receive the maximum allowable benefit under the Plan, you should ALSO designate them as beneficiaries in Section 3 of this form, whether they are dependent children or not.)

NAMES OF CHILDREN: (Attach a separate sheet if necessary)			DATE OF BIRTH						
LAST NAME	GIVEN NAME(S)	D	D	М	М	Y	Y	Y	Y
1.									
2.									
3.									
4.									

PO Box 371, Halifax, NS B3J 2P8

Purdy's Wharf, Tower 2, Suite 700, 1969 Upper Water St., Halifax, NS B3J 3R7

FORM.0092

### Section 3 – Designation of Beneficiary(ies) (PLEASE PRINT CLEARLY)

A designated beneficiary is not entitled to receive a monthly pension benefit. They are only entitled to receive a refund of your member contributions plus interest, less any pension payments that have already been made, if applicable. This applies only in the event that your eligible survivors (spouse and/or dependent children) pre-decease you. Please use the following section to identify a beneficiary(ies). If you do not wish to choose a beneficiary, simply write "Estate" on the first line in the box below. Note that any beneficiary designated below will be identified on your annual pension statement.

If you designate more than one beneficiary, benefits will be divided equally among them unless you indicate otherwise.

As indicated in Section 2, if you would like to ensure that your children receive the maximum allowable benefit under the Plan, you should ALSO designate them as beneficiaries in this section, whether they are dependent children or not.

### \*\*\*\*\* PLEASE DO NOT LIST ANY SPOUSE IDENTIFIED IN SECTION 2 HERE. \*\*\*\*\*

		Relationship/									Percent %
Name of Person or Organization		Charity Registration#	Date of Birth					(should total 100%)			
LAST NAME	GIVEN NAME(S)		D	D	M	M	Y	Y	Y	Y	
LAST NAME	GIVEN NAME(S)		D	D	М	M	Y	Y	Y	Y	
LAST NAME	GIVEN NAME(S)		D	D	М	M	Y	Y	Y	Y	
LAST NAME	GIVEN NAME(S)		D	D	М	M	Y	Y	Y	Y	
LAST NAME	GIVEN NAME(S)		D	D	М	M	Y	Y	Y	Y	
LAST NAME	GIVEN NAME(S)		D	D	М	M	Y	Y	Y	Y	

#### KEEP A COPY OF THIS DESIGNATION FOR YOUR RECORDS AND PROVIDE A COPY TO YOUR BENEFICIARY(IES).

### **Declaration of Plan Member**

I hereby revoke any prior beneficiary designation and designate the person(s) and/or organization(s) listed above as my beneficiary(ies):

Print Name

Date (DD-MM-YYYY)

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Signature of Plan Member

FORM.0092



Agency

### 2022 Personal Tax Credits Return

#### Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions.

Fill out this form based on the best estimate of your circumstances.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number								
Address	Postal code	For non-residents only		Social insurance number							
		Country of permanent resider	nce								
<b>1. Basic personal amount</b> – Every resident of Canada can enter a basic personal amount of \$14,398. However, if your net income from all sources will be greater than \$155,625 and you enter \$14,398, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$155,625, you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2022 Personal Tax Credits Return, and enter the calculated amount here.											
2. Canada caregiver amount for infirm children under age 18 – Either parent (but not both), may claim \$2,350 for each infirm child born in 2005 or later, that resides with both parents throughout the year. If the child does not reside with both parents throughout the year, the parent who is entitled to claim the "Amount for an eligible dependant" on Line 8 may also claim the Canada caregiver amount for that same child who is under age 18.											
<b>3. Age amount</b> – If you will be 65 or older on December 31, 2022, and your net income for the year from all sources will be \$39,826 or less, enter \$7,898. If your net income for the year will be between \$39,826 and \$92,480 and you want to calculate a partial claim, get Form TD1-WS, Worksheet for the 2022 Personal Tax Credits Return, and fill in the appropriate section.											
<b>4. Pension income amount</b> – If you will receive regula Plan, Quebec Pension Plan, Old Age Security, or Guar annual pension income, whichever is less.				on							
<b>5. Tuition (full time and part time)</b> – If you are a stud Employment and Social Development Canada, and yo are enrolled full time or part time, enter the total of the	u will pay more than \$100 p	or college, or an educational insi per institution in tuition fees, fill in	titution certified this section. If	by you							
6. Disability amount – If you will claim the disability at Tax Credit Certificate, enter \$8,870.	mount on your income tax a	and benefit return by using Form	T2201, Disabili	ty							
7. Spouse or common-law partner amount – If you are supporting your spouse or common-law partner who lives with you and whose net income for the year will be less than Line 1 (Line 1 plus \$2,350 if they are infirm), enter the difference between this amount and their estimated net income for the year. If their net income for the year will be Line 1 or more (Line 1 plus \$2,350 if they are infirm), you cannot claim this amount. In all cases, if their net income for the year will be \$25,195 or less and they are infirm, go to Line 9.											
<ul> <li>8. Amount for an eligible dependant – If you do not have a spouse or common-law partner and you support a dependent relative who lives with you and whose net income for the year will be less than Line 1 (Line 1 plus \$2,350 if they are infirm and you cannot claim the Canada caregiver amount for children under age 18 for this dependant), enter the difference between this amount and their estimated net income. If their net income for the year will be Line 1 or more (Line 1 plus \$2,350 or more if they are infirm), you cannot claim this amount. In all cases, if their net income for the year will be \$25,195 or less and they are infirm and are age 18 or older, go to Line 9.</li> </ul>											
9. Canada caregiver amount for eligible dependant an infirm eligible dependant (aged 18 or older) or an i \$25,195 or less, get Form TD1-WS and fill in the appro	nfirm spouse or common-l	w partner – If, at any time in the aw partner whose net income for	e year, you supp r the year will be	ort							
<b>10. Canada caregiver amount for dependant(s) age</b> age 18 or older (other than the spouse or common- or could have claimed an amount for if their net incless, enter \$7,525. If their net income for the year will b Form TD1-WS and fill in the appropriate section. You of If you are sharing this amount with another caregiver w appropriate section.	aw partner or eligible dep come were under \$16,748 be between \$17,670 and \$2 can claim this amount for m	bendant you claimed an amour ) whose net income for the year 25,195 and you want to calculate ore than one infirm dependant as	nt for on Line 9 will be \$17,670 a partial claim, ge 18 or older.	or							
<b>11. Amounts transferred from your spouse or com</b> their age amount, pension income amount, tuition amo unused amount.				F							
<b>12. Amounts transferred from a dependant</b> – If your benefit return, enter the unused amount. If your or you all of their <b>tuition amount</b> on their income tax and ber	r spouse's or common-law	partner's dependent child or grar									
<b>13. TOTAL CLAIM AMOUNT</b> – Add Lines 1 to 12. Your employer or payer will use this amount to determ	ine the amount of your tax	deductions.									



Canadä

#### Filling out Form TD1

Fill out this form **only** if any of the following apply:

- you have a new employer or payer and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to claim the deduction for living in a prescribed zone
- you want to increase the amount of tax deducted at source
- Sign and date it, and give it to your employer or payer.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

#### More than one employer or payer at the same time

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1 for 2022, you **cannot claim them again**. If your total income from all sources will be **more** than the personal tax credits you claimed on another Form TD1, **check** this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.

#### Total income less than total claim amount

Check this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on Line 13. Your employer or payer will not deduct tax from your earnings.

#### Non-residents (Only fill in if you are a non-resident of Canada.)

As a non-resident of Canada, will 90% or more of your world income be included in determining your taxable income earned in Canada in 2022?

	Yes (Fill	out the	previous	page.)
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No (Enter "0" on Line 13, and do not fill in Lines 2 to 12 as you are not entitled to the personal tax credits.)

If you are unsure of your residency status, call the international tax and non-resident enquiries line at 1-800-959-8281.

#### Provincial or territorial personal tax credits return

If your claim amount on Line 13 is more than \$14,398, you also have to fill out a provincial or territorial TD1 form. If you are an employee, use the Form TD1 for your province or territory of employment. If you are a pensioner, use the Form TD1 for your province or territory of residence. Your employer or payer will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deductions. If you are claiming the basic personal amount **only**, your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount.

**Note:** If you are a Saskatchewan resident supporting children under 18 at any time during 2022, you may be able to claim the child amount on Form TD1SK, 2022 Saskatchewan Personal Tax Credits Return. Therefore, you may want to fill out Form TD1SK even if you are **only** claiming the basic personal amount on this form.

#### Deduction for living in a prescribed zone

If you live in the Northwest Territories, Nunavut, Yukon, or another prescribed **northern** zone for more than six months in a row beginning or ending in 2022, you can claim any of the following:

- \$11.00 for each day that you live in the prescribed northern zone
- \$22.00 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling

that you maintain, and you are the only person living in that dwelling who is claiming this deduction

Employees living in a prescribed **intermediate** zone can claim 50% of the total of the above amounts. For more information, go to **canada.ca/taxes-northern-residents**.

#### Additional tax to be deducted

You may want to have more tax deducted from each payment, especially if you receive other income, including non-employment income such as CPP or QPP benefits, or old age security pension. By doing this, you may not have to pay as much tax when you file your income tax and benefit return. To choose this option, state the amount of additional tax you want to have deducted from each payment. To change this deduction later, fill out a new Form TD1.

#### **Reduction in tax deductions**

You can ask to have less tax deducted on your income tax and benefit return if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

#### Forms and publications

To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at **canada.ca/cra-info-source**.

#### Certification

I certify that the information given on this form is correct and complete.

Signature

It is a serious offence to make a false return.

Date

\$

\$



### 2022 Nova Scotia Personal Tax Credits Return

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your provincial tax deductions.

Fill out this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number							
Address	Postal code	For non-residents only Country of permanent reside	Social insuranc	e number						
		Country of permanent reside								
<b>1. Basic personal amount</b> – Every person employed in Nova Scotia and every pensioner residing in Nova Scotia can claim the basic personal amount. If your taxable income from all sources for the year will be \$25,000 or less enter \$11,481, comprising the basic amount of \$8,481 and the additional amount of \$3,000, and if it is more than \$75,000 enter \$8,481. If your taxable income will be between \$25,000 and \$75,000 and you want to calculate a partial claim for the \$3,000 additional amount, get Form TD1NS-WS, Worksheet for the 2022 Nova Scotia Personal Tax Credits Return, and fill in the appropriate section. If you will have more than one employer or payer at the same time in 2022, see "More than one employer or payer at the same time" on page 2.										
2. Age amount – If you will be 65 or older on December 31, 2022, and your net income from all sources will be \$30,828 or less, enter \$4,141. If your net income for the year will be between \$30,828 and \$58,435 and you want to calculate a partial claim, get Form TD1NS-WS, Worksheet for the 2022 Nova Scotia Personal Tax Credits Return, and fill in the appropriate section.										
<b>2.1 Age amount supplement</b> – If you will be 65 or older on December 31, 2022, and your taxable income from all sources will be \$25,000 or less, enter \$1,465. If your taxable income for the year will be between \$25,000 and \$75,000 you can calculate a supplement claim. To calculate the claim get Form TD1NS-WS, and fill in the appropriate section.										
<b>3. Pension income amount</b> – If you will receive regul Pension Plan, Quebec Pension Plan, Old Age Security estimated annual pension income, whichever is less.										
4. Tuition and education amounts (full time and part time) – If you are a student enrolled at a university, college, or educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees, fill in this section. If you are enrolled full time, or if you have a mental or physical disability and are enrolled part time, enter the total of the tuition fees you will pay, plus \$200 for each month that you will be enrolled. If you are enrolled part time and do not have a mental or physical disability, enter the total of the tuition fees you will pay, plus \$200 for each wonth that you will be enrolled. If you are enrolled part time and do not have a mental or physical disability, enter the total of the tuition fees you will pay, plus \$60 for each month that you will be enrolled part time.										
<b>5. Disability amount</b> – If you will claim the disability a Tax Credit Certificate, enter \$7,341.	mount on your income tax a	nd benefit return by using Form	T2201, Disability							
6. Spouse or common-law partner amount – If you a their net income for the year will be \$848 or less, enter you want to calculate a partial claim, get Form TD1NS	\$8,481. If their net income	for the year will be between \$84								
6.1. Spouse or common-law partner supplement – and your taxable income from all sources will be \$25,0 sources will be between \$25,000 and \$75,000 and you calculate a supplement claim. To calculate the claim, g	00 or less, enter \$3,000 les ar spouse or common-law pa	s their net income. If your taxabl artner's net income will be under	e income from all							
<b>7. Amount for an eligible dependant</b> – If you do not who lives with you and whose net income for the year between \$848 and \$9,329 and you want to calculate a	will be \$848 or less, enter \$	8,481. If their net income for the	year will be							
<b>7.1. Amount for an eligible dependant supplement</b> dependant relative who lives with you, and your taxable income. If your taxable income from all sources will be under \$3,000, you can calculate a supplement claim.	e income from all sources w between \$25,000 and \$75,0	ill be \$25,000 or less, enter \$3,0 000 and your eligible dependant	00 less their net s net income will be							
8. Caregiver amount – If you are taking care of a dep or less, and who is either your or your spouse's or corr		vhose net income for the year w	ll be \$13,677							
<ul> <li>parent or grandparent (aged 65 or older); or</li> <li>relative (aged 18 or older) who is dependent on your lift the dependant's net income for the year will be betwee Form TD1NS-WS and fill in the appropriate section.</li> </ul>			I claim, get							
9. Amount for infirm dependants age 18 or older – spouse's or common-law partner's relative, who lives i \$2,798. You cannot claim an amount for a dependant between \$5,683 and \$8,481 and you want to calculate	n Canada, and whose net in you claimed on line 8. If the a partial claim, get Form TE	come for the year will be \$5,683 dependant's net income for the D1NS-WS and fill in the appropri	or less, enter year will be ate section.							
<b>10. Amounts transferred from your spouse or com</b> their age amount, pension income amount, tuition and enter the unused amount.										
<b>11. Amounts transferred from a dependant</b> – If your benefit return, enter the unused amount. If your or you all of their <b>tuition and education amounts</b> on their in	r spouse's or common-law p	partner's dependent child or gran								
<b>12. TOTAL CLAIM AMOUNT</b> – Add lines 1 to 11. Your employer or payer will use this amount to determ	ine the amount of your provi	incial tax deductions.								

#### Filling out Form TD1NS

- Fill out this form only if you are an employee working in Nova Scotia or a pensioner residing in Nova Scotia and any of the following apply:
  - you have a new employer or payer and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration;
  - you want to change amounts you previously claimed (for example, the number of your eligible dependants has changed); or
  - you want to increase the amount of tax deducted at source.

Sign and date it, and give it to your employer or payer.

If you do not fill out Form TD1NS, your employer or payer will deduct taxes after allowing the basic personal amount only.

#### More than one employer or payer at the same time

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1NS for 2022, you **cannot claim them again**. If your total income from all sources will be **more** than the personal tax credits you claimed on another Form TD1NS, **check** this box, enter "0" on line 12 and do not fill in lines 2 to 11.

#### Total income less than total claim amount

Check this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 12. Then your employer or payer will not deduct tax from your earnings.

#### Additional tax to be deducted

If you wish to have more tax deducted, fill in "Additional tax to be deducted" on the federal Form TD1.

#### **Reduction in tax deductions**

You can ask to have less tax deducted on your income tax and benefit return if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

#### Forms and publications

To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at **canada.ca/cra-info-source**.

Date

#### Certification

I certify that the information given on this form is correct and complete.

Signature

It is a serious offence to make a false return.

## **PSSP External Resources**



Government of Canada Pension-Related Sites:

- Canada Pension Plan
   <u>www.canada.ca/en/services/benefits/publicpensions/cpp.html</u>
- Old Age Security
   <u>www.canada.ca/en/services/benefits/publicpensions/cpp/old-age-security.html</u>
- Canada Revenue Agency <u>www.cra-arc.gc.ca/rpd</u>
- Statistics Canada
   <u>www.statcan.gc.ca/eng/start</u>
- Bank of Canada
   <u>www.bankofcanada.ca</u>

For Province of Nova Scotia employees only:

Nova Scotia Government Retired Employees Association (NSGREA)
 <u>www.nsgrea.ca</u>

NSGREA is the primary retirees' organization in connection with the PSSP over the past decades. An application form may be obtained by using the link above.

Other retiree organizations also exist. Some of these include CUPE Retirees' Association and the Canadian Association of University Teachers - Retiree Benefits.

- Nova Scotia Government and General Employees Union (NSGEU)
   <u>www.nsgeu.ca</u>
- Nova Scotia Government Website
   <u>www.novascotia.ca</u>
- Nova Scotia Pharmacare
   <u>www.novascotia.ca/dhw/pharmacare</u>
- Medavie Blue Cross
   <u>www.medavie.bluecross.ca</u>
- Health Care Contact Information for Pensioners: For Group Life Insurance and Health Plan 1-902-424-7685 or 1-902-424-3240

### Our contact information:

Purdy's Wharf, Tower 2, Suite 700, 1969 Upper Water St., Halifax, NS B3J 3R7 Mailing Address: PO Box 371, Halifax NS B3J 2P8



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