



# Boilermakers' National Benefit Plans (Canada)

## Summary of Benefits for Temporary Foreign Workers

### January 2021

Temporary Foreign Workers (TFWs) are provided benefits under the Boilermakers' National Pension Plan (Canada) as follows:

1. TFWs contributions to the Pension Plan will be at rate shown in the applicable collective agreement.
2. Contributions paid under the collective agreement are multiplied by the most currently determined transfer ratio for the Plan and the net amount is remitted monthly to the Plan's defined contribution (DC) benefit managed by Manulife Financial. For example if the collective agreement rate is \$6.00 per hour and the transfer ratio is 50% the net amount of \$3.00 per hour is remitted to the DC account in the TFW's name .
3. TFWs will receive periodic statements from Manulife Financial showing the activity in their DC account. Semi-annual and annual Statements are also available on Manulife's website <https://gsrs1.manulife.com>
4. TFWs select the type of investment for their DC account. If no selection is made the contributions allocated to the DC account are automatically deposited to a balanced fund in the TFW's name. TFWs can change their investment options at any time. Investment options may be subject to investment management fees which are paid from the TFW's DC account. Information about investment options and recent investment returns are available on the Plan's website at <https://boilermakersbenefits.ca/resources>.
5. TFWs may withdraw the value of their DC account (contributions paid to the DC account plus/minus net investment income/fees) once they have ceased employment for a minimum of 30 days. DC accounts must be closed and all funds withdrawn by December 1st of the year the TFW turns age 71.

Temporary Foreign Workers (TFWs) are provided benefits under the Boilermakers' National Health Plan (Canada) as follows:

1. Health contributions are paid for the TFW in accordance with the applicable collective agreement.
2. Contributions remitted for the TFW are deposited to a Health Care Spending Account (HCSA) in the TFW's name.
3. The TFW may use the money in the HCSA to pay for a variety of health care expenses such as: hospital, vision care, dental, drugs, hearing aids. Expenses may be incurred in Canada or the TFW's home country.
4. The maximum amount that can be retained in the HCSA at any time is CAD \$5,550 subject to any amendment approved by the Trustees. Contributions earned in one year must be used by the end of the second year or they are forfeited. This is a requirement of the Income Tax Act, Canada. For example, if contributions of CAD\$3,600 are earned in 2020, CAD \$3,600 must be used for health care expenses by December 2021.

- TFWs may file claims with the Plan Administration Office or by registering on-line. Please click on the Member's Login in area under the Plans' website to register.

All TFWs are required to complete the Plans' Temporary Foreign Trained Worker Benefits and Pension Enrollment Form and submit it to the Plan Administration Office. The Form is attached to this document and available on the website here: <https://boilermakersbenefits.ca/forms#foreign>. The Plans need the Enrollment Form to identify the worker, communicate with the worker for the purposes of record keeping, accepting claims and regulatory compliance.

TFWs have a dedicated section on the Plan's website where further information can be found, including Frequently Asked Questions here: <https://boilermakersbenefits.ca/faq>.

**For more information please contact the Boilermakers' National Benefit Plans (Canada) Plan Administration Office:**

**45 McIntosh Drive, Markham, Ontario, Canada L3R 8C7**

Phone: **1-800-668-7547** | Fax: **1-905-946-2535** | Email: **questions@boilermakersbenefits.ca**.

Web: **www.boilermakersbenefits.ca**



# BOILERMAKERS' NATIONAL BENEFIT FUNDS (CANADA)

Administration Office  
45 McIntosh Drive, Markham, Ontario L3R 8C7

Boilermakers' National Pension Fund (Canada) Plan Registration Number 0366708 and Boilermakers' National Health and Welfare Fund (Canada)

## TEMPORARY FOREIGN TRAINED WORKER BENEFITS AND PENSION ENROLLMENT

**IMPORTANT: THIS ENROLLS YOU IN THE BOILERMAKERS' NATIONAL BENEFIT PLANS (CANADA) AND YOU ARE GIVING CONSENT TO THE PLANS FOR COLLECTION AND USE OF YOUR PERSONAL INFORMATION. SEE PRIVACY STATEMENT**

**Return this Form by Fax (00-1-905-946-2535) or by email to: [questions@boilermakersbenefits.ca](mailto:questions@boilermakersbenefits.ca)**

### TEMPORARY FOREIGN WORKER BASIC INFORMATION (PLEASE PRINT)

|  |                          |     |                          |
|--|--------------------------|-----|--------------------------|
| Your Name:   |                          |     |                          |
| Temporary Canadian Social Insurance Number<br>(This is also the number that your Employer will use to report Contributions to the Plans on your behalf)        |                          |     |                          |
| Boilermakers' Union Registration Number  |                          |     |                          |
| Your HOME Address (out of Canada)<br>(provide full address, city/town, county, Country)  |                          |     |                          |
| Your Email address:  |                          |     |                          |
| Your Date of Birth:  | Month                    | Day | Year                     |
| Your Marital / Family Status: (Single, Married, Common Law, Separated, Divorced, Widowed)  |                          |     |                          |
| Name of Spouse (if applicable)   |                          |     |                          |
| Employer's Name (if known)   |                          |     |                          |
| Employment Date(s) with Employer (if known)<br>(First date of employment)  | Month                    | Day | Year                     |
| I agree to have my pension account invested in the Manulife balanced fund. I understand that I can change this option later by completing the necessary forms. | <input type="checkbox"/> | YES | <input type="checkbox"/> |
|  |                          |     | NO                       |
| Date this Form was completed   | Month                    | Day | Year                     |
| Name of person who completed this Form   |                          |     |                          |

By signing below, I hereby certify that the information provided is true to the best of my knowledge, and consent to the collection, maintenance, use and disclosure of my personal information as described in the Privacy Statement below. I acknowledge that providing my consent will allow access to the information required to assess my benefit eligibility and entitlement, and that refusing to consent may result in delay or denial of my request and/or benefit. This consent may be revoked by me at any time by sending written instructions to the Plans' Administration Office.

I consent to the collection, use and disclosure of my personal information  YES  NO

**Worker's Signature and Consent**

**Date**

Privacy Statement: I authorize the Boilermakers' National Health Plan (Canada), the Boilermakers' National Pension Plan (Canada) (together called "the Plans"), their administrator Employee Benefit Plan Services Limited, and providers working with the Plans or administrator to collect, maintain, use and disclose my personal information that is necessary for the administration of the Plans. Personal information will be protected pursuant to the applicable legislation. The Plans may collect, maintain, use and disclose my personal information with relevant persons or organizations (employers, health benefit managers, health professionals, institutions, insurers, investigative agencies, legal counsel, other plans or unions, pharmacies, regulators, re-insurers) in order to manage the Plans and entitlement to the benefits of the Plans, and may include information such as financial, health or benefits related information. Questions related to the Privacy Statement should be directed to the Privacy Officer

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