



# BOILERMAKERS' NATIONAL BENEFIT FUNDS (CANADA)

Administration Office  
45 McIntosh Drive, Markham, Ontario L3R 8C7  
Tel: 905-946-2530 • Fax: 905-946-2535

Administration Office  
15220-114 Avenue, Edmonton, AB, T5M 2Z2  
Tel: 780-455-3502 • Fax: 780-488-7423

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

## STATEMENT OF MARITAL STATUS (NEWFOUNDLAND)

I, the undersigned, understand that the meaning of the word "Spouse" as defined in the Newfoundland and Labrador Pension Benefits Act as follows:

- (i) not being married to the Participant and
    - (a) not being prevented by law from marrying the Participant, has cohabited continuously with the Participant in a conjugal relationship for a period of not less than one year, or
    - (b) being prevented by law from marrying the Participant, has cohabited continuously with the Participant in a conjugal relationship for a period of not less than 3 years,
- and is cohabiting or has cohabited with the Participant within the preceding year, or
- (ii) if there is no person described in subparagraph (i)
    - (a) is married to the Participant,
    - (b) is married to the Participant by a marriage that is voidable and has not been voided by a judgement of nullity; or
    - (c) has gone through a form of marriage with the Participant, in good faith, that is void and is cohabiting or has cohabited with the Participant within the preceding year.

or shall mean such other definition as prescribed in the Newfoundland and Labrador Pension Benefits Act.

I, \_\_\_\_\_ therefore state:

\_\_\_\_\_ I was the Spouse, as defined by the Newfoundland and Labrador Pension Benefits Act;

\_\_\_\_\_ I was not the Spouse, as defined by the Newfoundland and Labrador Pension Benefits Act;

\_\_\_\_\_  
(Full Name – Please Print)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
(Name of Witness – Please Print)

\_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Date Signed)

*Questions about the collection of Personal Information should be directed to the Recording Secretary, Boilermakers' National Pension Fund (Canada) at the Administration Office.  
Please keep a copy of this Form for your records.*

**Privacy Statement:** 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 will collect, maintain, use and disclose only the 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 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.