



BOILERMAKERS' NATIONAL BENEFIT FUNDS (CANADA)

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

BOILERMAKERS' NATIONAL PENSION PLAN (CANADA)

DECLARATION OF COMMON-LAW RELATIONSHIP

MEMBER'S PERSONAL INFORMATION (see Privacy Statement on next page)

Name: _____ Social Insurance Number: _____

Address: _____

City and Province: _____ Postal Code: _____

Telephone Number: _____

I, _____ the above named and undersigned, solemnly declare that I have lived with
_____ in a conjugal relationship from _____ to the
present time at _____.
(address)

1. There are children of the common-law relationship by birth or adoption (check one)

_____ yes _____ no

If yes, please provide the following information on each child:

First Name	Legal Last Name	Date of Birth

Check One
Yes No

2. My common-law Spouse and I:

- (a) have jointly signed a residential lease, mortgage or purchase agreement relating to a residence in which we both live or have lived
- (b) jointly own property other than our place of residence
- (c) have joint bank, trust credit union or charge card accounts
- (d) have declared each other as Spouses on federal income tax returns

_____	_____
_____	_____
_____	_____
_____	_____

- 3. (a) I have life insurance on myself that names my common-law Spouse as beneficiary
- (b) My common-law Spouse has life insurance on him/herself that names me as beneficiary

_____	_____
_____	_____

4. If none of the above apply, please provide other evidence that would support your conjugal relationship as common-law Spouses.

I, _____, solemnly declare that I have lived with _____
(name of common-law Spouse)

_____ in a conjugal relationship from _____ to the
(name of Member)

present time at _____.
(address)

I hereby consent to the use of my Personal Information for record keeping, reporting and Plan administration purposes.

Member's Signature

Date

I hereby consent to the use of my Personal Information for record keeping, reporting and Plan administration purposes.

Common-law Spouse's Signature

Date

Name of Witness (Print)

Date

Signature of Witness

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.