

TOLEDO ELECTRICAL WELFARE FUND

APPLICATION FOR PERMANENTLY DISABLED ELIGIBILITY

I understand that approval of this application for Permanently Disabled Eligibility will result in my being eligible for Early Retiree insurance benefits. I also understand that should I not be able to submit proof of Social Security Award of permanent disability and/or proof of approval of a permanent disability benefit from a qualified (Internal Revenue Code 501, et seq.) International Brotherhood of Electrical Workers related pension plan and/or a corporate retirement plan and/or gain approval of a permanent disability as determined by the Trustees, that the loss of all eligibility in the Fund will occur after I have exhausted my self-payment privileges.

(Please Print)

Name:		
Social Security Number (last 4) or UID#:		
Date of Birth:		
Address:		
City:	State:	Zip:
Telephone Number:		
Date Last Worked:		
Date Disability Was Incurred:		

Signature: _____

Date: _____

In order to be eligible for this benefit you must have had twenty-four (24) consecutive months of eligibility immediately prior to the date that the disability was incurred.

WHAT TO SUBMIT WITH COMPLETED APPLICATION:

-Medical proof of your disability such as medical records, clinical notes or some form of documentation from your physician. We will then submit it to Hines & Associates for approval. This may take several weeks.

OR

-Documentation related to proof of permanent disability as recognized by Social Security (i.e. Social Security Award letter).

***Failure to provide these documents with submitted application will cause a delay in the application process. ***