



HOOPP

Pensioner Information Change Form

Date Received (for HOOPP use only)

Updated January 2008

Please read the Instructions page before you proceed. Please print, using black ink.

1 CURRENT INFORMATION *(Please complete this section.)*

Name: Miss Mrs. Ms.
 Mr. Sister Dr. (last name) (first name) (middle initial)

Social insurance number (SIN):

2 CHANGE OF INFORMATION

Change name to: Miss Mrs. Ms.
 Mr. Sister Dr. (last name) (first name) (middle initial)

Proof of legal name change is attached.

Change address to: (number) (street) (apt. no)

(city) (province) (postal code) Effective date of change: Month Day Year

Change of phone number: Change of e-mail:

If you have a qualifying spouse, he or she is automatically your primary beneficiary. To report any non-spouse beneficiary/beneficiaries you would like to name, please complete a Pensioner Beneficiary Designation Form and return it to HOOPP.

3 CHANGE IN BANKING INFORMATION *(Complete only to report changes.)*

I want my HOOPP pension payment to be directly deposited into my account at a financial institution. I have attached a blank cheque, marked "void," from this account or completed the information below.

Name and complete address of financial institution:

Branch transit number: Your account number:

4 AUTHORIZATION OF CHANGES *(Please complete this section.)*

I authorize the changes noted above.

I am the pensioner. I have property or general power of attorney for this pensioner. *(If you haven't already done so, please supply HOOPP with an original or a complete notarized or certified copy of the power of attorney document.)*

Signature: Date:

Daytime phone number:

SEND ORIGINAL TO HOOPP MAKE ONE COPY FOR YOUR FILES

HOOPP, 1 Toronto Street, Suite 1400, Toronto ON M5C 3B2 Tel: 416-369-9212

INSTRUCTIONS

WHAT TO COMPLETE

- Section 1, in all cases. HOOPP needs this information to locate and update your file.
- Section 2, if you are changing your name, please attach a copy of your marriage certificate or other proof of your legal change of name.
- Section 3, to notify HOOPP of a change in the way you want to receive your monthly pension payments — by mail, by direct deposit, or by direct deposit to a different account. The account must be in the name of the member.
- Section 4, in all cases, HOOPP cannot process the changes reported on this form without the signed authorization of the pensioner or a person who has valid power of attorney to act on the pensioner's behalf. Please provide the original or a complete notarized or certified copy the General or Property power of attorney document.

CHANGE IN BANKING INFORMATION

- Use this form to instruct HOOPP to change the way it pays you. Your pension can be deposited in a chequing or savings account at any Canadian financial institution.
- **Please keep your old account open until the first pension payment has been deposited into your new account.** This will prevent a disruption in pension payments.