

# RETIREMENT APPLICATION CHECK LIST

**Do not** submit this check list to IMRF—for employer’s use only.

Use this check list as a reference or place the copy in the member’s file. The completed check list then provides documentation of the retirement process and should **not** be submitted to IMRF.

## Member responsibilities:

- \_\_\_\_\_ Obtain “Retirement Checklist” from IMRF if not previously requested
- \_\_\_\_\_ Obtain Pension Estimate from IMRF (1-800-ASK-IMRF or 1-800-275-4673)
- \_\_\_\_\_ Contact Social Security if eligible (age 62 or older)
- \_\_\_\_\_ Submit letter of resignation or equivalent to employer
- \_\_\_\_\_ Complete and file application for IMRF Retirement (Form 5.20)
- \_\_\_\_\_ Contact other Illinois Pension Systems under the Reciprocal Act (if applicable)

## Member should print his/her Social Security number on ALL documents sent to IMRF:

- \_\_\_\_\_ All members submit a **copy** of **Birth Certificate**
- \_\_\_\_\_ Married members or members in a civil union submit a **copy** of **Marriage/Civil Union Certificate**
- \_\_\_\_\_ Divorced members (who divorced while participating in IMRF) submit a **copy** of **Judgment of Dissolution of Marriage/Civil Union**

## Employer files Notice of Termination (Form 6.41)

*(If employer has Internet access, must submit termination via Employer Access)*

- \_\_\_\_\_ Indicate the member’s final payroll month
- \_\_\_\_\_ Indicate number of member’s unused, unpaid sick days

## Discuss with member

- \_\_\_\_\_ Health Insurance Continuation, see IMRF *Manual for Authorized Agents* at [www.imrf.org](http://www.imrf.org)
- \_\_\_\_\_ Deferred Compensation carrier
- \_\_\_\_\_ NCPERS Group Voluntary Life Insurance continuation

## Member will receive the following information from IMRF:

1. IMRF booklet: “For Retiring Members: Insights.” The booklet will include the following:
  - Designation of Beneficiary (Form 6.11A)
  - IRS Form W-4P for tax withholding
2. IMRF booklet: “Returning to Work After Retirement”  
*(Failure to inform IMRF of a retiree’s return to work that qualifies for IMRF participation could result in significant financial repercussions for the retiree.)*
3. Additional health insurance information
4. Single (unmarried or not in a civil union) members —“Distribution/Rollover Certification” (Form BW-60)
5. Option letter (if under 62 years of age)—will receive after IMRF receives final wage report from your employer
6. Certificate of Benefits

*Employers may use IMRF’s Monthly Report of Benefit Approvals  
to verify accuracy of amount charged against employer’s account for a retiring member’s pension.*