



**DISQUALIFYING EMPLOYMENT INFORMATION REQUEST AND
AUTHORIZATION TO VERIFY EMPLOYMENT**

Participant's Name: _____ **Participant's Alt. ID:** _____

I am requesting that the Laborers Pension Fund make a determination about whether the following employment is disqualifying under the terms of the Plan. I understand that the Laborers' may contact the below employer to obtain information about said employment and authorize the release of information regarding my job duties and dates of employment.

- ☐ I am considering employment with: _____
- ☐ I started employment with the following employer on _____:

Company: _____
(employer that you are requesting determination about)

Address: _____

Phone: _____

1. This employer performs the following services:

2. I will perform / perform the following job duties:

3. I will supervise / supervise the following job titles:

4. I will belong to the following union and/or have contributions reported to the following pension fund:

5. I understand the rules about Disqualifying Employment as described below and advise that the work listed above:

- ☐ Would not be considered Disqualifying
- ☐ Would be considered Disqualifying
- ☐ Not Sure (complete #6 below)

- ✓ Work that is performed by Laborers or any other Building Trades Craftsman including supervising construction workers, is Disqualifying
- ✓ Self-employment in the same or related business as any Contributing Employer is Disqualifying
- ✓ Employment or self-employment in any Work which is or may be under the jurisdiction of the Union is Disqualifying

6. I am not sure if the work described in 1 above would be considered Disqualifying. The reasons I am not sure are as follows:

Signature

Date



CHICAGO & VICINITY LABORERS' PENSION FUND
EMPLOYERS DISQUALIFYING EMPLOYMENT INFORMATION (8/08)

Employer: _____
Address: _____
Phone: _____

Participant's Name: _____ **Participant's Alt. ID:** _____

The above listed participant is eligible to receive a pension benefit with the Laborers Pension Fund of Chicago. In order to qualify for a pension benefit under the terms of our Plan, the participant must not be engaged in Disqualifying Employment. Therefore, we require information about the job title and duties in order to determine whether its allowed.

Please provide either a copy of your company's job description or complete and return this form to the Fund Office:

CHICAGO & VICINITY LABORERS' PENSION FUND
11465 W. CERMAK RD.
WESTCHESTER IL 60154-5768

If you should have any questions, please do not hesitate to contact our office at (708)562-0200 ext. 530; a customer service representative from the Pension Department will assist you.

1. Our company provides the following services:

2. Participant's job title is or would be as follows: _____

3. Participant started or will start working on: _____

4. Participant's job duties are or would be as follows:

5. Participant supervises or will supervise the following job titles:

6. Participant belongs or will belong to the following union:

7. We are making or will make contributions for this employment to the following pension fund:

8. Will these job duties involve work normally performed by those working in the Building Trades?
☐ Yes ☐ No

Signature Date

Print Name Job Title



Chicago & Vicinity Laborers' District Council

Pension Fund

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Toll Free: (866) 906-0200 • Telephone: (708) 562-0200 • Fax: (708) 562-0790 • Email: pension@chilpwf.com

Dear Pension Recipient:

The letter provides information about Disqualifying Employment and includes the forms necessary to request a determination about potential employment.

Under the Plan rules and regulations, a pensioner can not work in Disqualifying Employment and receive monthly pension benefits, as stated in the enclosed summary.

Specifically, Article 7, Section 7.7 of the amended Rules and Regulations (copy attached) states that the monthly benefit of a pensioner shall be suspended for any month in which the Participant is employed in disqualifying employment. Disqualifying Employment for the period before Normal Retirement Age is defined as any of the following:

1. Employment in Work regularly performed by Laborers or any other Building Trades Craftsmen, including supervising construction workers.
2. Self-employment in the same or related business as any Contributing Employer.
3. Employment or self-employment in any Work which is or may be under the jurisdiction of the Union.

There is no limit to the geographic area in which such employment would be Disqualifying Employment if performed before Normal Retirement Age.

Article 7, Section 7.7(b) of the amended Rules and Regulations (copy attached) states that the monthly benefit of a pensioner shall be suspended for any month in which the Participant is employed at least 40 hours in Disqualifying Employment **after Normal Retirement Age (usually age 65)**. Disqualifying Employment for the period after Normal Retirement Age is defined as any employment or self-employment that is:

1. In an industry covered by the Plan when the Participant's pension payments begin,
2. In the geographic area covered by the Plan when the Participant's pension payments begin, and
3. In any occupation in which the Participant Worked under the Plan at any time that is performed by Laborers.

In any event, any Work for at least 40 hours in a month for which contributions are required to be made to the Plan shall be disqualifying.

Pension Fax:
(708) 562-0790

Email:
Pension@chilpwf.com

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EMPLOYER PARTICIPANTS .

Builders Association, Employing Plasterers Association, Underground Contractors Association, Mason Contractors Association, Concrete Contractors Association, Wrecking Contractors, Concrete Products Employers, Lake County Illinois Employers, Illinois Road Builders Association, Bridge and Highway Structural Builders; i.e. all those who employ Laborers Engaged in the Building and Construction Industry.

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If you would like the Fund Office to make a determination about whether a certain job would be considered Disqualifying. Please complete the enclosed form and return it to the Fund Office.

It is also important that you provide a job description from the employer. Please provide either a copy of your company's job description or request that the employer completes the enclosed form, listing information about the job title and duties and return this form to the Fund Office.

The Fund Office will advise you whether the job would be considered Disqualifying and would cause your pension checks to be stopped. If you do not agree with the answer, you have the right to ask for a written determination from the Pension Committee of the Board of Trustees.

Should you have any questions regarding this matter, please contact Pension at extension 530.

Very truly yours,

LABORERS' PENSION FUND

Enclosures:

- ☐ Disqualifying Employment Information Form
- ☐ Employer Disqualifying Employment Information Form