

SPOUSAL CONSENT TO A TRANSFER TO A LIFE INCOME FUND (LIF)

I, _____ am the spouse, as defined in the *Pension Benefit Act*, of
(name of the Spouse)

_____ who has requested a transfer of locked-in money from
(name of pension plan member/former member
or owner of a Locked-in Retirement Account (LIRA)

(name of pension plan or financial institution administering LIRA)

I am aware that the administrator of a pension plan of a LIRA may not comply with a request to transfer locked-in money to a LIF unless the written consent of the spouse is obtained.

I am aware that there is no requirement under the *Pension Benefit Act* and *Regulation 909* for a spouse to provide such written consent. It is solely at the opinion of the spouse to provide written consent.

I understand that by providing written consent, I am not waiving my rights under the *Pension Benefit Act* and *Regulation 909* to survivor benefits or benefits which may be available on marriage breakdown.

I understand that as a spouse who is not living separate and apart from the owner of the LIF at the owner's date of death, I will be entitled to receive a death benefit of either the balance of the LIF as a locked lump sum payment or as an immediate or deferred life annuity.

I understand that as a spouse who is not living separate and apart from the owner of the LIF when LIF assets are used to purchase a life annuity, the annuity must provide a survivor pension of at least 60 per cent of the pension received by my spouse.

I understand that, in the event of marriage breakdown prior to the date an annuity is purchased, no more than 50 per cent of the LIF assets may be transferred to my LIRA or LIF, or to purchase an immediate or deferred life annuity.

I understand, that in the above situation, any interest I may have in the assets held in the LIF effective only where a court order or domestic agreement under the Family Law Act is provided to the administrator.

Spouse's Signature

Address

Date at _____ in the Province of _____, this _____ day
(city) (date)

of _____, 20_____.
(month)

(Witness printed name, signature and address)

Prior to completing this form, a spouse should consider obtaining Independent legal advice concerning Individual rights and the effect of consent.