

# Employees' Retirement Data / Plan Election

Date Stamp Here

Date Stamp Here

<i>Last Name</i>	<i>First Name</i>	<i>Initial</i>
<i>Mailing Address</i>	<i>City</i>	<i>State</i>
<i>Social Security Number</i>	<i>EIN</i>	<i>Contact Phone Number</i>

<b>Date of Birth (DOB)</b>			<b>Sex</b>	<b>Marital Status</b>		
Month	Day	Year	<input type="checkbox"/> Male	<input type="checkbox"/> Single	<input type="checkbox"/> Divorced	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Female	<input type="checkbox"/> Married	<input type="checkbox"/> Widowed	

<b>Check One</b>	
<input type="checkbox"/> New Hire	<i>Start Date &amp; Department/Agency</i>
<input type="checkbox"/> Rehired**	<i>Rehire Date if Applicable</i>

**Plan Election – Check One**

**All eligible employees are automatically enrolled in Retirement Plan C. If you choose to enroll in Plan D, you must elect that below.**

**Plan C** = 4%\* Salary  
*\*Plus 5<sup>1</sup>/<sub>3</sub>% of earnings over the Social Security Taxable Wage Base*

**Plan D** = 5<sup>1</sup>/<sub>3</sub>% Salary

- Eligible employees may choose to switch to Plan D WITHIN the first 30 days of employment. (Plan D has a higher contribution and pays a higher retirement benefit.) Regardless of your choice, you must clearly choose your plan designation at left.
- You may not change your mind about Plan enrollment at a future date – Your initial choice of Plans is irrevocable after the first 30 days.

**\*\* Rehired employees who left their money in the Fairfax County Employees' Retirement System (FCERS) must return to participation in the Plan they contributed to during their previous period of County employment.**

**Note:** Any member returning to FCERS, who **previously removed** their contribution balance from the system, will be considered a new member of FCERS with a choice between Plan C or D, within their first 30 days. Any eligible purchase of prior service must be started no later than one year after rehire date to qualify for lower interest. Additional information can be found on pages 11-13 of the Active Employees' Retirement Handbook and on the Retirement Systems website at [www.fairfaxcounty.gov/retirement](http://www.fairfaxcounty.gov/retirement).

## Retirement System Beneficiary Designation

If you are a vested employee on the active payroll when you die, and your spouse is listed as your sole primary beneficiary, your spouse will have the option of requesting a 50% survivor benefit, payable to them for their lifetime, or a refund of contributions and interest. If you are not married at the time of your death, your beneficiary is entitled to a refund of all your contributions and interest. **Beneficiary information can be changed at any time.** For more beneficiary information, please visit the Retirement Systems website at [www.fairfaxcounty.gov/retirement/active\\_employees/beneficiaries.htm](http://www.fairfaxcounty.gov/retirement/active_employees/beneficiaries.htm).

Primary Beneficiary Name(s)	Address	Relationship	DOB	SSN	%
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*(If you have a spouse, you may want your spouse to be your sole primary beneficiary - see Retirement System Handbook.)*

Contingent Beneficiary Name(s)	Address	Relationship	DOB	SSN	%
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*(A Contingent Beneficiary is/are the payee(s) who will be paid if your primary beneficiary is already deceased.)*

A member may designate as many beneficiaries as he/she chooses. Make sure the information is clearly stated with regards to percentages for each beneficiary.  
 Check this box if you have provided any additional beneficiary names or information on the back of this page.

**★Remember, you must make your Retirement Plan election within 30 days of your date of hire ★**  
***I understand the provisions of Plans C and D and make my election accordingly.***

Please make a copy for your records and return this original form to the  
**Fairfax County Retirement Systems**  
 10680 Main Street ♦ Suite 280  
 Fairfax, VA 22030 ♦ 703-279-8200 ♦ TTY: 711  
 ♦ FAX 703-273-3185

\_\_\_\_\_  
*Signature of Member*

\_\_\_\_\_  
*Date of Signature*