



Superintendent of Pensions
 #402, 9515 – 107 Street, Edmonton, AB T5K 2C3
 Phone: (780) 427-8322 Fax: (780) 422-4283

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APPLICATION FOR REGISTRATION OF A PENSION PLAN

PLEASE READ INSTRUCTIONS ON PAGE 4 BEFORE COMPLETING THIS FORM

General Information

NAME OF THE EMPLOYER OR BOARD OF TRUSTEES (PLAN SPONSOR/ADMINISTRATOR)			
ADDRESS OF HEAD OFFICE			
MAILING ADDRESS IN CANADA IF OTHER THAN HEAD OFFICE			
PHONE:		FAX:	
E-MAIL			

Nature of Business

Are any plan members employed in federally regulated activities or industries?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Please state the main activity or activities of your business:				

Type of Organization

Public Sector		Private Sector	
<input type="checkbox"/> Municipal Government	<input type="checkbox"/> Federal Government	<input type="checkbox"/> Incorporated	<input type="checkbox"/> Trade or Employee Association
<input type="checkbox"/> Municipal Enterprise	<input type="checkbox"/> Federal Enterprise	<input type="checkbox"/> Unincorporated Business (sole proprietor or partnership)	<input type="checkbox"/> Religious, Charitable or Other Non-Profit Organization
<input type="checkbox"/> Provincial Government	<input type="checkbox"/> Other (Public) :	<input type="checkbox"/> Co-operative	<input type="checkbox"/> Other (Private) :
<input type="checkbox"/> Provincial Enterprise			

PLEASE COMPLETE ALL APPLICABLE AREAS OF THIS SECTION

Administrative Information

OFFICIAL NAME OF PLAN	
NAME OF CONTACT PERSON WITH THE EMPLOYER WHO HAS SIGNING AUTHORITY FOR THE PENSION PLAN, OR THE NAME OF THE CHAIRPERSON OF THE BOARD OF TRUSTEES	
ADDRESS AND TELEPHONE NUMBER OF PERSON ABOVE IF DIFFERENT THAN THAT SHOWN IN GENERAL INFORMATION SECTION	
NAME AND ADDRESS OF FUNDHOLDER(S) (A FUNDHOLDER IS THE INSURANCE COMPANY, TRUST COMPANY OR THE INDIVIDUAL TRUSTEES APPOINTED TO HOLD THE PENSION PLAN FUNDS)	
POLICY AND / OR TRUST ACCOUNT NUMBER	
NAME AND ADDRESS OF CONSULTANT/ACTUARY	
NAME AND ADDRESS OF THIRD PARTY ADMINISTRATOR (IF ANY)	
NAME AND ADDRESS OF THE PLAN AUDITOR (SPECIFIED MULTI-EMPLOYER PENSION PLANS ONLY)	
NAME AND ADDRESS OF CUSTODIAN (INDIVIDUALLY TRUSTEED PENSION PLANS ONLY)	
NAME AND ADDRESS OF OTHER RELATED PARTY	

Plan Classification

How many employers (affiliated or not) participate in this plan?

Is this plan collectively bargained? Yes No

Is this a pension plan whose only members are "specified individuals" as defined in the *Income Tax Act* (Canada)? **Important – Please refer to the instructions (Page 5) if you answer yes to this question.** Yes No

Plan Details

Effective Date of Plan:

YEAR				MONTH		DAY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Plan Fiscal Year End:

(The pension plan's fiscal year end is December 31st, unless the plan text defines another date).

MONTH		DAY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Plan Review Date if different than Plan Fiscal Year End :

(plans with defined benefit provisions only)

[The pension plan's review date is the same as the plan fiscal year end unless the plan defines another date]

MONTH		DAY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Has a written statement of the investment policies and procedures (SIPP) been established for this plan? (unless all the investments are entirely directed by the members) Yes No

For plans with defined benefit provisions, has the SIPP been filed with the plan actuary? Yes No

Multi-Unit Pension Plans only:

Has a participation agreement been signed by all participating employers? Yes No

Membership

Number of employees and plan members on payroll as of the effective date of the plan.

AREA OF EMPLOYMENT	EMPLOYEES ON PAYROLL			PLAN MEMBERS ON PAYROLL	
	MALE	FEMALE		MALE	FEMALE
ALBERTA	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
NEWFOUNDLAND	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
PRINCE EDWARD ISLAND	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
NOVA SCOTIA	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
NEW BRUNSWICK	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
QUEBEC	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
ONTARIO	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
MANITOBA	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
SASKATCHEWAN	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
BRITISH COLUMBIA	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
YUKON TERRITORY	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
NORTHWEST TERRITORIES	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
NUNAVUT	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
OUTSIDE CANADA	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
TOTAL	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>

Filing of Documents (have you checked the appropriate boxes?)

The following signed documents **have been included** with the application for registration:

<input type="checkbox"/>	the pension plan text
<input type="checkbox"/>	the funding agreement (s)
<input type="checkbox"/>	any document that creates the plan or under which the plan is constituted (e.g. Board Resolution)
<input type="checkbox"/>	➔ the employee booklet, or
<input type="checkbox"/>	➔ a statement that every member will be given a copy of the full plan text

In addition, if the plan has a defined benefit provision:

<input type="checkbox"/>	the initial actuarial valuation
<input type="checkbox"/>	a completed cost certificate
<input type="checkbox"/>	a commuted value basis form

In addition, if the plan is a Multi-Unit Employer Pension Plan as defined in the *Employment Pension Plans Act*:

<input type="checkbox"/>	a copy of the participation agreement which either designates one employer as the administrator for the purposes of the <i>Employment Pension Plans Act</i> or designates a Board of Trustees as the administrator.
<input type="checkbox"/>	if a Board of Trustees has been established, a copy of the agreement that sets out the terms under which the Board will operate

Certification (may only be signed by the plan sponsor or Chairman of the Board of Trustees). A third party administrator or consultant is not permitted to sign the form on behalf of the plan sponsor.

<p>AUTHORIZED SIGNATURE OF ADMINISTRATOR</p> 	<p>COMMENTS (if any)</p>
<p>PRINTED NAME</p> 	
<p>TITLE OR POSITION</p> 	<p>DATE</p>
<p>COMPANY, ASSOCIATION OR BOARD OF TRUSTEES</p> 	

NOTE: Information collected on this form may be released to individuals, upon request, in accordance with the requirements, terms and conditions of the *Freedom of Information and Protection of Privacy Act*.

ONLY THE ADMINISTRATOR IS AUTHORIZED TO SIGN THE CERTIFICATION SECTION

INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR REGISTRATION

Terms of Reference:	
Single Employer Pension Plan	means a plan in which only one employer participates
Multi-Unit Pension Plan (MUPP)	means a pension plan that in which more than one employer participates and which has not been designated a Specified Multi-Employer Pension Plan (SMEPP)
Specified Multi-Employer Pension Plan (SMEPP)	means a pension plan in which more than one employer participates, and which has been designated as a Specified Multi-Employer Pension Plan by the Superintendent.
Plan for Specified Individuals (PSI)	<p>means a plan whose only members are “specified individuals” for the purposes of the Income Tax Act (Canada).</p> <p>After August 9, 2006, if all the specified individuals are CONNECTED PERSONS, do not complete this form and do not submit any documents for registration. The <i>Employment Pension Plans Act</i> no longer requires these plans (called PCI’s) to submit documentation.</p> <p>However, any plan with at least one non-connected person member must register. These plans will be subject to the filing requirements applicable to all other plans; however, the <i>Income Tax Act</i> may set limits for the funding of benefits under these plans.</p>
Administrator	<p>means:</p> <ul style="list-style-type: none"> ➔ in the case of a single employer plan or a PSI, the plan sponsor ➔ in the case of a MUPP, the designated employer or Board of Trustees, as applicable ➔ in the case of a SMEPP, the Board of Trustees

DOCUMENTS REQUIRED TO BE FILED WITH THE APPLICATION FOR REGISTRATION OF A PENSION PLAN

Certified copies of the following documents must accompany the filing of the application with the office of the Alberta Superintendent of Pensions. A pension plan may not be registered until all required documents are filed.	
ALL PLANS MUST FILE:	<ul style="list-style-type: none"> ➔ The pension plan text ➔ The funding agreement(s) ➔ Any document that creates the plan or under which the plan is constituted; and ➔ The employee booklet or a statement that each member will be given a copy of the full plan text
In addition, PLANS WITH DEFINED BENEFIT PROVISIONS must file:	<ul style="list-style-type: none"> ➔ The initial actuarial valuation ➔ A completed cost certificate form
In addition, MULTI-UNIT PENSION PLANS must file:	<ul style="list-style-type: none"> ➔ The participation agreement between all participating employers ➔ Where a Board of Trustees is established, the agreement identifying how the Board will operate.

INSTRUCTIONS FOR CALCULATING FEES AND FILING THE APPLICATION FOR REGISTRATION FORM

The application and accompanying documents must be filed with the office of the Alberta Superintendent of Pensions not later than 60 days after the decision to establish the plan is made.

The application must be accompanied by a fee. The fee amount is based on rates as specified in section 6 of the *Employment Pension Plans Regulation*. The filing fee is based on the total number of members shown in the Membership section of this form.

NUMBER OF ACTIVE PLAN MEMBERS	FEE PAYABLE
0 – 29	\$200.00
30 – 2,857	\$7.00 PER MEMBER
2,857 AND OVER	\$20,000.00

Your cheque and money order should be made payable to the “Minister of Finance of Alberta”.

Please forward this application with the required fee to:

**Alberta Finance
 Alberta Superintendent of Pensions
 402 Terrace Building, 9515 – 107 Street
 EDMONTON, AB T5K 2C3**