

Carpenters' Residential Benefit Plans Local 27

45 McIntosh Drive, Markham, Ontario L3R 8C7

DIRECT DEPOSIT AND E-NOTIFICATION REQUEST FOR ALL HEALTH AND WELLNESS FUNDS & PRODUCTIVITY BONUS

MEMBER'S NAME: STREET ADDRESS: CITY: PROVINCE: PHONE (CELL): REQUEST FOR DIRECT DEPOSIT OF BENEFITS To request direct deposit or to modify your banking information, please complete the information below OR submit a void cheque. In both cases, please sign the authorization. DEPOSIT TO (BANK OR FINANCIAL INSTITUTION) ADDRESS OF BRANCH BRANCH NUMBER INSTITUTION NUMBER ACCOUNT NUMBER ACC		INITIAL REQUEST	CHANGE REQUEST	
STREET ADDRESS: CITY:	MEMBER PERSONAL INFORMATION			
PHONE (HOME):	MEMBER'S NAME:			
PHONE (HOME):	STREET ADDRESS:			
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DEPOSIT TO (BANK OR FINANCIAL INSTITUTION) ADDRESS OF BRANCH BRANCH NUMBER INSTITUTION NUMBER ACCOUNT NUMB	REQUEST FOR DIRECT DEPOSIT OF BENEFITS			
AS the beneficiary paid under my Health Plan, I hereby authorize the Carpenters' Health and Wellness Fund and the Local 27 Productivity Bonus Pay Fund to deposit these sums in my bank account, whose particulars appear above, or on the enclosed cheque, until such time as I make a written request to the contrary. I understand that the Fund has no further obligation with regard to the benefits paid in accordance with the request. I also understand that the Fund can, without prior notice, terminate the direct deposit of benefits and issue a cheque to me. This authorization, which takes effect on date below, is valid for all the other active bank accounts in this or any other financial institution that I may name in the future. Member's Signature Date: (DD/MM/YYYY) REQUEST TO SUBSCRIBE TO E-NOTIFICATION FOR DIRECT DEPOSIT Subscribing to e-notification means you will be notified by email of the status of your Health benefit. To subscribe to e-notification or to change your email address, please complete the information below. Fill in the section that corresponds to the address where you want to receive your notifications. Please provide ONE email address and indicate if it's a home or work email.	To request direct deposit or to modify your banking information, please complete the information below OR submit a void cheque. In both cases, please sign the authorization.			
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	Email Address:		Home Work	

Please e-mail the completed Direct Deposit and E-Notification Request or a Void Cheque to the Plan Administration Office at benefits@carpentersresidential,ca or by mail using the enclosed postage paid envelope. All emails containing personal information must be encrypted.

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UBC Carpenters' Residential Benefit Plans

Health and Wellness | Legal Services | RRSP | Pension | Productivity Bonus | Vacation Pay

Plan Administration Office: 45 McIntosh Drive, Markham, Ontario, L3R 8C7

Phone: 905-946-9700 | 1-800-263-3564 Fax: 905-946-2535

Email: benefits@carpentersresidential.ca Website: www.carpentersresidential.ca

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