



Electronic Communications Authorization Form

In accordance with Section 44 of the Nova Scotia *Pension Benefits Act*, the administrator of a pension plan may use electronic means that comply with the *Electronic Commerce Act* to send notices, statements and other records to members, former members, retired members and other persons entitled to benefits from a pension plan if the administrator has the person's permission to do so. If you have not already completed a consent form, and you wish to receive electronic communications from the Halifax Regional Municipality Pension Plan (Nova Scotia Registration #0238063) in the future, please complete this form. Any communications containing confidential information will be protected by password. You must contact the HRM Pension Office and verify your identity to obtain the password. Contact information for the HRM Pension Office is at the bottom of this document.

To Be Completed by the Individual (Please Print)

By way of my signature, I consent to the electronic communication of notices, statements and other records from the Halifax Regional Municipality Pension Plan. If my email address changes, I will promptly notify the HRM Pension Plan Office. I may withdraw this consent at any time by contacting the HRM Pension Plan Office.

Last Name

First Name

Middle Initial

Social Insurance Number

Employee Number (if applicable)

Email Address

Signature

Date

Return of Form

If you wish to receive electronic communications from the Halifax Regional Municipality Pension Plan, please return your completed form to the HRM Pension Plan Office at the address below. If you do not wish to receive electronic communications from the Halifax Regional Municipality Pension Plan, please disregard this form. If you have any questions, please call the HRM Pension Office at 902-490-6213 or toll-free at 1-888-490-6213 or email HRMPension@halifax.ca.

HRM Pension Plan
1809 Barrington Street
Suite 1108, CIBC Building
Halifax, NS B3J 3K8

April 2018