

Member:**Identifier:****TO BE COMPLETED BY THE MEMBER**

Complete this form only if you want to transfer your pension to the plan of a new employer.

Check the appropriate boxes below.

 Transfer to a defined contribution registered pension plan (RPP) **Transfer to a defined benefit registered pension plan (RPP)**

• Name of new employer: _____

• Required documents: Form A
Form G
Form H
Form I**TO BE COMPLETED BY THE AUTHORIZED PERSON OF THE NEW PLAN**

Pension plan's name: _____

Plan registration's number (provincial): _____

Plan registration's number (federal): _____

Contact person: _____

Phone number: _____ Extension: _____

Maximum amount available transfer: \$ _____

- I confirm that the plan accepts the transfer of the funds, which will be transferred in accordance with the applicable rules governing locked-in funds.
- I confirm that the transferred funds will be used to recognize years of service in the new plan.

Authorized signature: _____ Date: _____
(Handwritten signature only)Plan member's signature: _____ Date: _____
(Handwritten signature only)

Additional information:

- If transferring to a defined benefit plan, any amount in excess of the prescribed amount will be automatically transferred to the new plan. However, if transferring to a defined contribution plan, an excess amount cannot be transferred to the new plan and will be paid to the member.

ADDITIONAL INFORMATION**DGPP Member Services**
Monday to Friday, from 8:30 a.m. to 4:30 p.m.**By phone**
Call us at 1-866-434-3166 or 514-285-3166**By secure messaging**
Write to us via the secure [Contact us](#) section of the DGPP website at [rcd-dgp.com](#)**HOW TO SEND YOUR DOCUMENTS****Via secure messaging through the [Contact us](#) section**
of the DGPP website at [rcd-dgp.com](#)**By mail or internal mail to**
Desjardins Insurance
LEV 200 – SS – G
200 Rue Des Commandeurs
Lévis QC G6V 6R2