Active	Number	

BURLINGTON EMPLOYEES' RETIREMENT SYSTEM

APPLICATION FOR SERVICE RETIREMENT

To the Retirement Board:

In accord Employees' Retirement from a	ance with the provisions of the larement System, of which I am a active service:	Class A _ E	B member, I l	hereby apply for		
Tue annual theat may	retirement become effective on _	Month	•	Year		
I request that my	retirement become effective off					
I was born on						
I shall have compretirement.	pleted years of service and	attained age _	as of the	date of my		
Cross out this paragraph	I have read the excerpts of the desire to have the normal modification.	retirement ber	relative to optionefit payable v	without optional		
	I have read the excerpts of the elect to receive my retirement b	e law attached enefit under th	relative to optione provisions of	onal benefits and Option		
or	The beneficiary whom I design	gnate to receiv	e the survivorsh	nip benefit at my		
	these death is my whose name is, as proof of					
paragraphs and was born on, as proof submit the following documentary evidence,						
	I reserve the right to revoke any designation of beneficiary under the normal form of payment.					
			(Signature of	Member)		
State of	ss.:					
County of	SS.:					
On this _	day of		, 20, pe	ersonally		
appeared before me the said named to me known and known to me to be the person described in and who executed the foregoing instrument and he (or she) acknowledged that he (or she) executed the same.						
		(Seal)				
		(~)	(Notary Publ	ic)		