

New Hampshire Retirement System 54 Regional Drive, Concord, NH 03301 Phone: (603) 410-3500 - Fax: (603) 410-3501 Website: www.nhrs.org - Email: info@nhrs.org

## Dear Member:

Application for Retirement
<ul> <li>Signature required in two places (Section II and Section V on Group I application; II and VI on Group II application)</li> </ul>
<ul> <li>Notarized signatures</li> </ul>
Mandatory Acknowledgement/Certification
Must be dated the same date or later than the application
<ul> <li>Spouse signs "Part A", if you are married</li> <li>If not married, member must sign "Part B"</li> </ul>
Notarized signature
Form W-4P
<ul> <li>Complete top section (name, address, social security number and filing status)</li> </ul>
Complete Step 4, if additional withholding desired  The state of
• If you wish to have no taxes withheld, please write "No Withholding" on the very bottom of the form
• Sign and date
Copy of Social Security card or Form W-9
☐ Electronic Direct Deposit (EDD)
State Retirees ONLY:
Health Insurance Pre-Application
Payment Options for Additional Contributions Form (if a participant in the Additional Contributions program)
ADDITIONAL REQUIRED DOCUMENTS – <u>COPIES</u> must be provided to NHRS
Copy of marriage certificate (ONLY Group II)
<ul> <li>Copy of beneficiary's (ies') birth certificate if Survivorship Option 2-4 selected</li> </ul>

Please contact NHRS if additional assistance is required. Thank you!

• Copy of **your** birth certificate