

Financial Services Commission of Ontario

## No Division of Family Law Value/Pension Assets FSCO Family Law Form 7

# (Optional Form)

Approved by the Superintendent of Financial Services pursuant to the *Pension Benefits Act*, R.S.O. 1990, c. P.8

### **IMPORTANT**

- This form can only be used on or after January 1, 2012.
- "Family Law Value" means the "imputed value" under the Ontario Pension Benefits Act.
- You (the Plan Member and the spouse/former spouse of the Plan Member) may want to get legal advice before completing this form.
- Read the instructions before completing this form.
- You (the Plan Member and the spouse/former spouse of the Plan Member) may complete this form to inform the pension plan administrator (Plan Administrator) that the Family Law Value/pension assets will not be divided between you. You are not required to complete this form.
- If you have a court order, family arbitration award or domestic contract that specifies that the Family Law
  Value/pension assets will not be divided between you and your spouse/former spouse, you may provide the Plan
  Administrator with a certified copy of any of these documents instead of completing this form.
- Completing this form will not affect potential support orders under section 66(4) of the Ontario *Pension Benefits Act.* It will not release you or your spouse/former spouse from support payment obligations that are enforceable in Ontario.
- Send this form to the Plan Administrator. Do not send this form to the Financial Services Commission of Ontario (FSCO).
- Print clearly.

Part A Pension Plan Information		
Name of Pension Plan		Pension Plan Registration Number
Plan Administrator		
Mailing Address (Street Number and Name)		Suite/Floor No.
City	Province	Postal Code

	Part B Plan Member and Plan Member's Spouse/Former Spouse Information		
Plan Member	Last Name	First Name and Initials	
	Plan Member's Employee/Pension Plan Identification Number (if known)		
Plan Member's Spouse/Former Spouse	Last Name	First Name and Initials	
For Plan			

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Part C Joint Confirmation		
Pick <b>ONE</b> that applies to you and your spouse/former spouse.		
We received a <b>Statement of Family Law Value (FSCO Family Law Form 4)</b> from the Plan Administrator. Although we will be ending (or we have ended) our spousal relationship, the Family Law Value as set out in <b>Part A</b> of that Statement is not to be divided.		
We received a Statement of Family Law Value (FSCO Family Law Form 4) from the Plan Administrator. Our spousal relationship is not ending.		
We have not made an application for a Family Law Value. We will be ending (or we have ended) our spousal relationship and the Plan Member's pension assets under the pension plan (identified in <b>Part A</b> of this form) are not to be divided.		
Our separation date is (or was):(yyyy/mm/dd)		
We acknowledge that completing this form will not release either of us from any future support obligations that may become payable pursuant to a support order enforceable under section 66(4) of the Ontario <i>Pension Benefits Act</i> .		

#### **Plan Member**

Signature of Plan Member

Name of Plan Member (printed)

Date (yyyy/mm/dd)

Sigr	nature of Witness	Name of Witness (printed)	Date (yyyy/mm/dd)
Witness Contact Inf	formation		
Mailing Address (Stree	t Number and Name)		Apt./Unit No.
City	Province	Postal Code	Telephone Number (Main)

## Spouse/Former Spouse of the Plan Member

 Signature of Spouse/Former Spouse of the Plan Member
 Name of Spouse/Former Spouse of the Plan Member
 Date (yyyy/mm/dd)

 (printed)
 (printed)
 (printed)

Signat	ure of Witness	Name of Witness (printed)	Date (yyyy/mm/dd)
Witness Contact Info	rmation		
Mailing Address (Street N	lumber and Name)		Apt./Unit No.
City	Province	Postal Code	Telephone Number (Main)

For Plan Administrator Use	
	ECCO Family Law Farm