



Wayne County Employees' Retirement System

28 West Adams, Suite 1900
Detroit, MI 48226
(313) 224-5890 Fax (313) 224-1917

Wayne County Airport Authority Defined Contribution Plan 4 Change Request Form

This form is used to make changes to the contribution rate for Defined Contribution Plan 4 and changes to voluntary, non-matching contributions to Defined Contribution Plan 4. (Such contributions are not eligible to be made in Hybrid Plan 5.)

Section I - Member Information

Name (Last, First, M.I.)		Social Security Number
Employee ID	Date of Birth	Daytime Phone Number
Street Address		
City	State	Zip Code

Section II – Contribution Changes

- ☐ I am requesting to increase my contribution to Defined Contribution Plan 4 to _____% (up to 2.5% of bi-weekly retirement eligible wages).
- ☐ I am requesting to increase my contribution to Defined Contribution Plan 4 to 3% of bi-weekly retirement eligible wages, as I have more than 10 years of credited service for retirement as an executive or non-executive exempt employee or I have more than 20 years of credited service for retirement as a classified employee. I understand that a service investigation will have to be completed to determine my eligibility.

Section III – Voluntary Non-Matching Contributions

- ☐ I am requesting to make voluntary, non-matching contributions to Defined Contribution Plan 4 of _____% of my bi-weekly retirement eligible wages or a flat dollar amount of \$_____.
- ☐ I am requesting to stop voluntary, non-matching contributions to Defined Contribution Plan 4.

Authorization

I certify that the information above is accurate and complete. I give Wayne County Employees' Retirement System permission to change my contributions according to the instructions above.

Signature

Date

For Office Use Only

Processed by	Date Processed	Effective Date
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