

Regimental No. or Pension No.

STATUTORY DECLARATION In the matter of an Application for Division of Pension Benefits Under the Pension Benefits Division Act

Privacy Notice

Provision of the personal information is required pursuant to the *Department of Public Works and Government Services Act*, para. 7(1)(*d*) and s.13 and will be used for the purpose of administrating the *Royal Canadian Mounted Police Superannuation Act* (RCMPSA) and the *Royal Canadian Mounted Police Pension Continuation Act* (RCMPPCA). Refusal to provide the personal information, or the provision of incorrect information may result in loss of benefits and/or delays in processing incorrect pension estimates, benefits, or statements. Personal information is protected, and only used and disclosed in accordance with the *Privacy Act* and as described in Personal Information Bank PWGSC PCU 702 – Federal Pension Administration. Under the Act, individuals have a right of access to their personal information and request correction, if erroneous or incomplete.

COMPLETE EITHER SECTION 1 OR 2 AND COMPLETE SE	ECTION 3	
Section 1 - MARRIED		
Complete this section only if the plan member and the spous	se were married and are now eit	ther separated or divorced.
I,		, declare that I married
Complete Name of Declarar	t	
		on
Complete Name of Spouse or Former	Spouse	(yyyymmdd)
(Check the applicable box)		
If divorced We have lived separate and apart since	We were divo	rced on
	(yyyymmdd)	(yyyymmdd)
If separated We have lived separate and apart since		
	(yyyymmdd)	
Section 2 - NOT MARRIED		
Complete this section only if the plan member and the composition conjugal relationship for at least one year and are now living		ed, but have cohabited in a
I,	, de	clare that I started living with
Complete Name of Declarant		
	in a conjugal relations	hip on
Complete Name of Common-law Partner or Former Partner		(yyyymmdd)
We have lived separate and apart since		
(yyyymm	dd)	



DURING THE PERIOD WE WERE MARRIED OR WE LIVED TOGETHER IN A CONJUGAL RELATIONSHIP, AS NOTED ABOVE: Section 3 -(Check the applicable box) There were no periods when we lived separate and apart due to a breakdown in our relationship. We lived separate and apart due to a breakdown in our relationship on the following dates: То То From From (yyyymmdd) (yyyymmdd) (yyyymmdd) (yyyymmdd) I make this Declaration conscientiously believing it to be true and knowing that it has the same effect as if made under oath. Declared before me at on City, Town or Village (yyyymmdd) **Expiry Date** in the province of (if applicable) (yyyymmdd) Stamp Signature

NOTE: Every person who knowingly makes a false or misleading representation in any application or other proceeding under the PBDA is guilty of an offence punishable on summary conviction.

RCMP-GRC 2484E (2014-07-001)

Indicate whether lawyer, commissioner of oaths, notary public (Stamp, seal, expiry date if applicable)