



**Transferring Accounts in the Firefighters' and Rescue Squad Workers' Pension Fund**

Please print or type in black ink.

**Section A. Tell us about yourself.**

FIRST NAME	MI	LAST NAME		SUFFIX
MAILING ADDRESS				SSN
CITY	STATE	ZIP CODE	TELEPHONE NO.	MEMBER ID
E-MAIL ADDRESS				DATE OF BIRTH

**Section B. Please authorize with your signature.**

I hereby certify that I have not previously received a refund of my contributions in the Firefighters' and Rescue Squad Workers' Pension Fund described in Section C. Further, I am an eligible member of the department or squad in Section C to which I am transferring my account in the Fund.

Member's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section C. Please provide the following information about your transfer.**

**Transfer from: (Be sure that this account is paid through the last day of service before you submit this form.)**

<input type="checkbox"/> Firefighter	FIRE DEPARTMENT OR RESCUE SQUAD	COUNTY	DATE SERVICE ENDED
<input type="checkbox"/> Rescue Squad Worker			
Dept. No.			

**Transfer to:**

<input type="checkbox"/> Firefighter	FIRE DEPARTMENT OR RESCUE SQUAD	COUNTY	DATE SERVICE BEGAN
<input type="checkbox"/> Rescue Squad Worker			
Dept. No.			

I hereby certify that the applicant named in Section A is a current member of this department/squad.

Authorized Signature of Chief or Designee \_\_\_\_\_ Date \_\_\_\_\_

**Section D. Please submit this form by mail or fax.**

Please submit this form by mail or fax.

- You may mail this form to the address below.
- You may fax this form to (919) 855-5800

**Thank you.**



Page 1 of 1

**Complete this form if you are a member of a Fire or Rescue Squad Department and are transferring to another Fire or Rescue Squad Department.**

**Guide A. Why does the Firefighters' and Rescue Squad Workers' Pension Fund (FRSWPF) need to be advised when I change departments?**

1. You can only report membership as an eligible Firefighter **or** Rescue Squad Worker to receive Retirement service credit in any calendar year. The Form 359 acts as the tracking document for the Pension Fund.

- An eligible firefighter may not also qualify as an eligible rescue squad worker in order to receive double benefits from the Pension Fund.
- An eligible rescue squad worker may not also qualify as an eligible firefighter in order to receive double benefits from the Pension Fund.

2. If you are reported on a Roster for in a calendar year by an Eligible Fire or Rescue Squad department, the contributions reported by you or on your behalf must match the eligible department where you performed your services. Otherwise, the contributions received by the Pension Fund office will be delayed until a Form 359 (Transfer form) has been submitted and processed by our office. If the form is not provided upon request, the contributions will be returned.

**Thank you.**

***N.C. Department of State Treasurer, Firefighters' and Rescue Squad Workers' Pension Fund***  
***3200 Atlantic Avenue, Raleigh, North Carolina 27604***  
***1-877-NCSECURE (1-877-627-3287) toll-free***  
***www.myncretirement.com***

REV 20150331

**359**  
**GUIDE**