Check List for Retirement Applications

**Application** (CO-898 NEW 2/09) – Original and 2 copies

Applicant’s Signature ___ Agency Signature ___ Verify Date of Retirement ___

Type of Option matches form submitted ___

Verify Type of Retirement Checked off on application ___

**Option Form** - Original

A – 50% Spouse  B – 50% / 100%  C – 10 Yr / 20 Yr  D – Lifetime

The form was witnessed properly ___

The Witness is not the Annuitant and/or the Beneficiary ___

**Spouse Waiver Consent Form** (CO-1047 Rev. 5/09) – Original (Not Required if Electing Option A 50% Spouse)

If married, verify receipt of marriage certificate ___

Verify that Parts I & III have been completed as follows:

Member’s Option Election ___

Member’s Signature ___

Spouse’s Signature ___

Name of Annuitant (if applicable) ___

Spouse’s Initials ___

Authorized witness/if notary, Expiration date required ___

If Single or Married less than one year, verify: ___

Completed Part I & II Authorized witness; if notary, expiration date required ___

**Birth Documentation** (one copy each)

Retiree Birth Certificate ___  **If applicable**, Annuitant Birth Certificate___

**Health Insurance Form** (CO-744 Rev 5/2010) – Original and 1 copy

Copy of Medicare Card if retiree or spouse is 65 years or older

**W4P** (Original) ___  **CT-W4P** (Original) ___

**Direct Deposit Form** (CO-1068 Rev 8/2011) Original ___