PLUMBERS & PIPEFITTERS LOCAL 9 WELFARE FUND Application for Temporary Disability Benefits

PART I – To Be Completed by Employee Name Soc. Sec. # Street Address City, State, Zip Telephone # _____ Date Last Employed _____ Last Employer ____ Were you immediately hospitalized for this condition? Yes _____ No _____ If Yes, dates of hospitalization. Admit Date ______ Release Date _____ If an Accident: Date _____ and Time ____ am pm Description of How & Where _____ Signature of Employee Date Part II – To Be Completed by Physician Nature of Illness or Injury _____ Date of First Treatment _____ Date of Most Recent Treatment _____ This patient has been continuously disabled (unable to work) starting: ____ (date) When should patient be able to return to work? _____ (Need estimated date) Physician's Name: _____ (please print) Physician's Address: _____ Physician's Phone # _____ Fax #_____ Physician's Signature Date

Part III – To Be Completed By Employee

The Internal Revenue Service requires that Temporary Disability Income payments made to you be reported to them as they will be treated as a part of your taxable income. As a result, these payments are subject to F.I.C.A. Taxes, Federal Income Taxes and New Jersey State Income Taxes. The appropriate deduction will automatically be made from your payments for FICA and New Jersey State Income Taxes. If you would like to have Federal Income Tax withheld from your payments, you may request withholding by making this election below:

Disability income payments will not start until this section is completed.

Option A ______ I do not want to have Federal Income Tax withheld from Temporary Disability Income payments made to me.

Option B _____ I elect to have \$____ withheld for Federal Income Taxes from each Temporary Disability payment made to me.

Please complete this election form by selecting either Option A or Option B below.

Please return this completed form to:

Linda Lawson I.E. Shaffer & Co. PO Box 1028 Trenton NJ 08628

Phone # (800) 792-3666 ext. 6130 FAX # (609) 883-7566