SECURITY BENEFIT FUND
OF THE
UNIFORMED FIREFIGHTERS ASSOCIATION

OF GREATER NEW YORK • LOCAL 94 I.A.F.F. AFL-CIO

204 EAST 23rd STREET, NEW YORK, N.Y. 10010

TEL: (212) 683-4723 • FAX: (212) 683-0693

Web Address: www.ufanyc.org Email: SBFStaff@ufanyc.org

NOTICE OF CHANGE OF ADDRESS / PHONE / EMAIL

YOUR INFORMATION

Last Name	First Name	Middle Name
Last 4 Social Security #	Current Unit & Group	Previous Unit & Group

☐ Active Firefighter ☐ Company Delegate

☐ Change in Company Delegate Please list name of former delegate:_____

☐ Retired Firefighter _____ _____

Date of Retirement Last Dept. Unit assigned to

NEW ADDRESS

Address:		
City:	State:	Zip Code:
Home Phone Number:	Cell Phone Number:	
Email Address:		

PREVIOUS ADDRESS

Address:		
City:	State:	Zip Code:

☐ **My beneficiary status has also changed. Please send me a new Benefits Enrollment Card so I may update my beneficiary/ies.**

SIGN HERE → _____ _____

Signature Date

*(Please do not write below – **for office use only**)*

SBF/UFA Records _____ _____

Signature Date

NOTE: Please make sure you also notify FDNY HQ if you're **ACTIVE** – and notify NYC Office of Labor Relations if you're ***RETIRED***.