



# NEW YORK CITY FIRE PENSION FUND

ONE BATTERY PARK PLAZA, 9TH FLOOR  
NEW YORK, NY 10004  
(929) 436-0099

## APPLICATION FOR SERVICE RETIREMENT AND TERMINAL LEAVE

**VESTED**

Member Information:

Date:

Tax ID No.

Reference No.

First Name

MI Last Name

Address

Apt

City

State

Zip Code

Rank:

Unit:

Date Appointed:

Accrued Leave Dates:

to

Date of Termination of Service:

Terminal Leave Dates:

N/A

to

N/A

Payable Date:

***During the twelve (12) months preceding retirement date:***

Was all duty performed in accordance with the Two Platoon—25 Group System?

Yes

No

If no, give reason.

Had you been assigned to Light Duty by the Medical Division?

Yes

No

Member Signature: \_\_\_\_\_

Approved

Disapproved

Company Commander

Rank

Unit

Group

Date

Approved

Disapproved

Battalion Chief

Unit

Group

Date

Approved

Disapproved

Deputy Chief

Unit

Group

Date