

***Application for Reinstatement of  
Pension Service "Service Buyback"  
Or  
"Cancellation by Forfeiture"***

Name: \_\_\_\_\_

Employee No. \_\_\_\_\_ Dept. \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Home Phone: \_\_\_\_\_

I am currently an employee of the City of Dallas and a contributing member of the Employees' Retirement Fund. I hereby request reinstatement of pension service listed below. I understand that all credited service is subject to verification by City records and that repayment of the computed amount as calculated by the Retirement Fund Office is required for reinstatement of pension service.

I have been given a copy of the (Chapter 40A-11) if the Dallas City Code. I understand that its provisions govern this reinstatement and that i must comply with them.

Please Enter Your Number Of Service Breaks \_\_\_\_\_

Scheduled Repayment Date: \_\_\_\_\_

PREVIOUS SERVICE:

<u>Date Employed</u>	<u>Date Terminated</u>	<u>Name</u> <i>(If different from present)</i>	<u>Employee number</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

