Sacramento County Employees' Retirement System
980 9th Street, Suite 1900
Sacramento, CA 95814
Phone: (916) 874-9119
Fax: (916) 874-6060
Web: www.scers.org

APPLICATION FOR SERVICE RETIREMENT

I am applying for retirement from Sacramento County Employees' Retirement System, in accordance with provisions of the County Employees' Retirement Law of 1937 and the Bylaws and Regulations governing the retirement system. I understand that, according to Section 31672 of the 1937 Act, I cannot apply for retirement more than 60 days before the retirement effective date requested below. I further understand that I will need to submit proof of birth for myself -- and for my eligible beneficiary, if applicable – before SCERS can finalize my benefit calculation and distribute the Election of Retirement Allowance required for payment.

_____
Name

_____
Retirement Effective Date

_____
Mailing Address

_____
Employer

_____
City/State/Zip

_____
Department (if applicable)

_____
Birthdate

(____)_____
Phone Number

XXX-XX-_____
SSN (last four digits only)

_____
E-mail Address (secondary/non-work address)

_____
Signature of Applicant

(TO BE COMPLETED BY SCERS)

_____
Date Informed Retirement Board

_____
JOHN W. GOBEL, SR.
Chief Benefits Officer