

# Teamsters Joint Council No. 83 of Virginia Health & Welfare and Pension Funds



www.tjc83funds.org

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## Request for Post-Retirement Employment Approval

Name \_\_\_\_\_ SSN \_\_\_\_\_

Former Contributing Employer \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Date Retiring/Retired \_\_\_\_\_

**Proposed Employer** \_\_\_\_\_ Phone No. \_\_\_\_\_

Proposed Employer's Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

DOT No. \_\_\_\_\_ Contact Person \_\_\_\_\_

Description of business \_\_\_\_\_

\_\_\_\_\_

Geographical area of business \_\_\_\_\_

What will you be doing? \_\_\_\_\_

\_\_\_\_\_

If trucking, what will you be hauling and where? \_\_\_\_\_

\_\_\_\_\_

Estimated number of hours per month you will work? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*For Office Use Only:*

**Approved / Denied** by \_\_\_\_\_ on \_\_\_\_\_