INTENT TO RETIRE

P 924 (R2024-10)

Important Notice: This PDF was designed to be filled in with Adobe Acrobat Reader. Download the form to your desktop and use Adobe Acrobat Reader to open, complete and submit this form. If you are using Edge or Chrome browser some fields will not work as intended and your form may not submit.

TO BE COMPLETED WITH YOUR PAYROLL ADMINISTRATOR

To	Attention
HR Pay & Client Services / Pensions (#8107PN)	, Retirement Analyst
From	Business Unit Payroll
Payroll Administrator	

Attached is the original Letter of Retirement (authorized by the Designated Authority) for the following employee:

Employee Name	Employee ID	Phone Number (daytime)
Personal Email Address		Alternate Contact Number

I am over 55 years old or will be 55 years old by the date of retirement listed below ☐ Yes ☐ No

☐ I am taking commuted value

Prior to completing the following section, please note that the last day of work may not be the same as the last day of pay if the employee has been on S&A, WCB, LTD, Vacation, etc. between these two dates.

Last Day of Work (YYYY-MM-DD)	Last Day of Pay (YYYY-MM-DD)	Retirement Date (YYYY-MM-DD) (day following last day of pay)
Accumulated Leave Will Be ☐ Paid Out ☐ Taken as Time Prior to Last Day of Pay		

Retirees who have completed at least 10 years of service with The City are eligible to receive a retirement certificate and gift.

*The Human Resources Payroll Administrator will provide you with the Retirement Gift Options - Order Form. The form is also available on the Calgary Fire Department website.

*As per Administration Policy number: HR-035

☐ **Dept ID:** Rehire Recommendation is satisfactory (If No, then Dept ID call 403-268-5800)

The information on this form is being collected under the authority of the Freedom of Information and Protection of Privacy (FOIP) Act, Section 33(c). The information will be used by the City of Calgary HR Pay Services for the purpose of personnel management. All information collected by the City of Calgary is protected by the provisions of the FOIP Act. Questions about the collection, use or disclosure of this information can be directed to Leader - Information & Records Management, Human Resources (403) 268-5240 or mailed to P.O. Box 2100, Stn. M Calgary, Alberta, Canada T2P 2M5 Mail Code: 8107RC

Employee Signature		Date
Business Unit Payroll Authorization	Phone Number	Date
Approving Authority (Dept ID Owner)	Phone Number	Date

Distribution: Original - Payroll Administrator for Distribution

ISC: Confidential