

Introduction

Checklist for Accidental Disability Retirement

Updated 3/2015

Pursuant to Sections 19 and 45 of Chapter 166 of the Acts of 2009, the following information will need to be provided to PERAC for any Accidental Disability retirement allowance that becomes effective on or after July 1, 2009.

Please note that PERAC will not approve any Accidental Disability allowances unless this sheet and the appropriate payroll records are included with the retirement calculation paperwork.



Checklist for Accidental Disability Retirement

Updated 3/2015

Retirement Board: Please place your address and phone number here. ▶

SAUGUS RETIREMENT BOARD
25R MAIN STREET, TOWN HALL ANNEX
SAUGUS, MA 01906
781-558-2903 OR 781-558-2892
EMAIL: SCRS@SAUGUSRETIREMENT.ORG

Member's Last Name

First

M.I.

Retirement Board

For members who were not working in a temporary or acting position on the date of injury:

1. **Date of Injury:**

(Please note that for a member who was injured and returned to work and whose initial injury was exacerbated by a later on-the-job injury, the most recent injury date should be used.)

2. **Annual Rate of Regular Compensation on the Date of Injury:** \$

(Please provide a copy of the payroll record for the member on date of injury.)

3. **Average Annual Rate of Regular Compensation During the Previous 12-month Period for which the Member Last Received Regular Compensation Immediately Preceding the Date the Retirement Allowance Becomes Effective:** \$

(Please provide a copy of the payroll record for the member for the 12-month period preceding the date of retirement.)

Note: For members retiring under one of the presumptions (G.L. c. 32, §§94, 94A or 94B), the date of the injury is to be the date the member last received regular compensation.

For members who were working in a temporary or acting position on the date of injury:

4. **Date of Injury:**

(Please note that for a member who was injured and returned to work and whose initial injury was exacerbated by a later on-the-job injury, the most recent injury date should be used.)

5. **Annual Rate of Regular Compensation on the Date of Injury for the Member's Permanent Position:** \$

(Please provide verification of the compensation for the member's permanent position on the date of injury.)

6. **Average Annual Rate of Regular Compensation for the Member's Permanent Position During the Previous 12-Month Period for which the Member Last Received Regular Compensation Immediately Preceding the Date the Retirement Allowance Becomes Effective:** \$

(Please provide verification of the compensation for the member's permanent position for the 12-month period preceding the date of retirement.)

