

OKLAHOMA POLICE PENSION AND RETIREMENT SYSTEM

1001 N. W. 63rd Street, Suite 305
Oklahoma City, Oklahoma 73116-7335
1 (405) 840-3555 / 1 (800) 347-6552
www.opprs.ok.gov

APPLICATION FOR SERVICE PENSION

CITY _____

I, _____, SSN _____, hereby make application to the Oklahoma Police Pension and Retirement Board for a service pension.

I have served not less than twenty (20) years as a duly appointed police officer of a participating municipality pursuant to 11 O.S. § 50-101 et seq.

Such service began on _____, and ended on _____.

Total credited service is: _____ years, _____ months and _____ days.

Please indicate on the lines below if service was not continuous or if service was in more than one participating police department:

Having paid the agreed contributions to the Oklahoma Police Pension and Retirement Fund, I am eligible for a pension beginning _____ (must be first day of month).

As above named applicant, I have read the foregoing application and its contents, and the statements made therein are true and correct.

APPLICANT SIGNATURE (Witnessed by Notary) _____

MAILING ADDRESS _____

CITY, STATE, ZIP _____

E-MAIL ADDRESS (OPTIONAL) _____

TELEPHONE NUMBER (_____) _____ DATE _____

NOTARY'S SIGNATURE:

STATE OF _____) ss.

COUNTY OF _____)

Subscribed and sworn to before me, the undersigned notary, on this _____ day of _____, 20 _____.

Notary Signature _____ My commission number _____

[SEAL] My commission expires _____

A COPY OF THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS APPLICATION:

- 1. Federal and State Tax Form
- 2. Direct Deposit Form (Form 110)