

GWINNETT COUNTY HUMAN RESOURCES

POST RETIREMENT DEATH BENEFICIARY FORM



Please send your completed form and documentation to the Department of Human Resources by fax at 770.822.7775, hand deliver, or mail to:
Gwinnett County Department of Human Resources · 75 Langley Drive · Lawrenceville, GA 30046.

GENERAL INFORMATION

The Post Retirement Death Benefit (PRDB) is not a life insurance product. It is an additional benefit of the Defined Benefit Retirement package provided by Gwinnett County Board of Commissioners. There is no cash value to it. You cannot borrow against it nor can you increase its value. It will never decrease in value no matter how long you live.

The value of your Post Retirement Death Benefit can be seen in the chart that follows. Find your level of monthly pension benefit in the first column and the amount of Post Retirement Death Benefit will be shown in the column to the right.

If your monthly pension benefit is:	Then your PRDB is:
Less than \$100	\$5,000
\$100 - \$299.99	\$10,000
\$300 or more	\$15,000

RETIREE

Completing the form

Fill out your personal information in the first section completely. Do not write in the shaded area; this is for office personnel.

Primary Beneficiary – you may change this beneficiary(s) at any time

The primary beneficiary is the person(s) you want to designate to receive your Post Retirement Death Benefit upon your death. If you name more than one, the combined percentage each receives must add up to 100%. You must include their date of birth, address, and social security number.

Contingent Beneficiary – you may change this beneficiary(s) at any time

The contingent beneficiary(s) you list will be designated to receive your Post Retirement Death Benefit in the event that you and your primary beneficiary(s) pass away. If you name more than one, the percentage each receives must add up to 100%. You must include their date of birth, address, and social security number.

BENEFICIARY

In the event of the retiree's death, you will need to contact Gwinnett County Government, Human Resources - Benefits at 770.822.7932. Proof of identity (Driver's License, State or Military ID card, or birth certificate) and a certified death certificate will be needed to start processing the benefit.



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Name			
Social Security Number		Email address	
Address			
Home Phone		Cell Phone	

RETIREMENT DEATH BENEFIT BENEFICIARY INFORMATION

If a mistake is made on the form, cross through and initial the incorrect item then make the correction. Do not use white out.

Name and Address of Beneficiary	Percentage	Relationship	Social Security	Date of Birth
Name and Address of Contingent/Secondary Beneficiary	Percentage	Relationship	Social Security	Date of Birth

I understand that this beneficiary form is for my Post Retirement Death Benefit only. This form will supersede any other beneficiary form I have signed in the past.

Signature

Effective Date of Change