

Iron Workers Local Union No. 5 and Iron Workers Employers Association Employees Pension Trust Fund

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Phone (877) 367-0541 • Fax (206) 505-9727 • Website: www.iw5benefits.org

Administered by
Welfare & Pension Administration Service, Inc.

CHANGE OF ADDRESS FORM

Employee Name: _____
(Please print)

Employee Social Security Number: _____

Employee Cell Phone Number: _____

Employee Home Phone Number: _____

Employee email address: _____

Old Address

(Include apartment or suite number)

New Address

(Include apartment or suite number)

Please send correspondence according to my selection to the above address starting:

(Date)

(Signature)

(Date)

This address change pertains to the following:

☒ RETIREMENT

NOTE: Any address change information must be submitted in writing and contain the member's signature.

To avoid unnecessary delays in receiving correspondence from the Trust Office, it is imperative that we have your current address on file.