

New York District Council of Carpenters Benefit Funds
395 Hudson Street
New York, NY 10014
Telephone: (212) 366-7300, Fax: (212) 366-7432

Authorization to Rescind Reciprocal Waiver

I have previously signed a Reciprocal Waiver form requesting that my Benefit Contributions are to be transferred from the New York City District Council of Carpenters to my Outside Home Fund.

At this time, I have transferred into a NYDCC Local and wish to rescind this Waiver. I am requesting that all my Benefits remain in the New York City District Council of Carpenters Benefit Funds.

Name

Social Security/UBC #

Address

Old Local

New Local

Date Transferred

Date of Birth

Signature

Date