Information 0100135 LA

Retraite Québec

Power of Attorney

Through this power of attorney, you (mandator) grant a **natural person** (mandatary) the authority to act for you and on your behalf in your affairs with Retraite Québec regarding the Québec Pension Plan (QPP), public-sector pension plans and the Bureau des ententes de sécurité sociale (BESS).

Please note that the power of attorney can be cancelled. To do so, you must complete the appropriate section of this form.

IMPORTANT: You cannot appoint a legal person, that is, a company, an organization, an association or a union.

This form must be used only by a person **who is mentally fit to manage his or her own affairs**.

Purpose of the form

Select the action to be taken:

- ☐ **Grant** a power of attorney to a natural person (mandatary): complete sections 1 to 3 of the form and **sign section 5**.
- ☐ **Cancel** a power of attorney: complete sections 1 and 2 and **sign section 6**.

1. Information about the person who grants the power of attorney (mandator)

Enter your Social Insurance Number (mandator):

Sex	Family name	Given name
☐ F ☐ M	Family name at birth, if different	Date of birth (year / month / day)

Address (number, street, apartment or P.O. Box)

City	Province	Country	Postal Code

Telephone

Home (area code) Other (area code) Extension

2. Information about the person authorized to act in the client's name (mandatary)

Enter the Social Insurance Number of the person acting on behalf of the client (mandatary):

Sex	Family name	Given name
☐ F ☐ M	Family name at birth, if different	Date of birth (year / month / day)

Address (number, street, apartment or P.O. Box)

City	Province	Country	Postal Code

Telephone

Home (area code) Other (area code) Extension

3. Extent of the power of attorney

This power of attorney allows the **person designated in section 2 (mandatary)** to act on your behalf and to carry out the same transactions with Retraite Québec as you would for the following files (check the box for the file(s) for which you want to be represented):

- ☐ the Québec Pension Plan (QPP);
- ☐ public-sector pension plans (employees of the Gouvernement du Québec's departments and public or parapublic agencies, such as the Government and Public Employees Retirement Plan (RREGOP), the Pension Plan of Management Personnel (PPMP), etc.;
- ☐ the Bureau des ententes de sécurité sociale (BESS).

I authorize the mandatary (section 2) to represent me in the following transaction(s):

- ☐ Change of address;
- ☐ Direct deposit (sign-up, modification, or cancellation);
- ☐ Income tax deductions;
- ☐ Income tax slips duplicate;
- ☐ Steps to take regarding the processing of an application for benefits filed with Retraite Québec;
- ☐ All of the transactions listed above.

IMPORTANT:
By designating a mandatary for your file regarding **your public-sector pension plan**, you accept that your payments be made in one of the following ways:

- **By direct deposit**, in a bank account in your name. To sign up for direct deposit once the mandatary has been entered, you must call Retraite Québec (public-sector pension plans).
- **By cheque** mailed **to the address of the person designated in section 2**.

The power of attorney ends if one of the following events occur:

- you or the mandatary present a request for a cancellation (to cancel the power of attorney, the person must contact us by telephone or in writing, or complete section 6 of the form);
- a more recent power of attorney is prepared;
- a medical report declares that you are not longer mentally fit to manage your affairs;
- a judgment confirming incapacity is rendered;
- your death or the death of your mandatary.

As the power of attorney is not limited in time, if you want it to end at a time different from the ones listed above, please specify the end date here **(do not enter anything if you do not want an end date)**:

End date of the power of attorney (if desired): year month day

4. Correspondence

For the Québec Pension Plan (QPP): the correspondence will continue to be mailed to the address entered in your file.

For public-sector pension plans: the correspondence will be mailed to the address of the person designated in section 2 as soon as the information on this form has been entered.

5. Power of attorney and signature

5.1 Authorization from the person who grants the power of attorney (mandator)

With this power of attorney, I grant the **person designated in section 2** the authority to act for me and on my behalf with Retraite Québec for the transactions mentioned in section 3.

I agree with the information in sections 3 and 4 regarding the extent of the power of attorney. I acknowledge that the designated person and I may end the power of attorney at any time.

Signature _____ Date year month day
(person granting the power of attorney)

5.2 Acceptance of the power of attorney by the person designated in section 2 (mandatary)

By completing this form, I accept the mandate granted to me by the person identified in section 1. I acknowledge that this person and I may end this mandate at any time by contacting Retraite Québec.

Signature _____ Date year month day
(designated person)

6. Cancellation of the power of attorney (To be completed and signed by the mandator or the mandatary **only** if you want to cancel a power of attorney already entered in your file.)

I (mandator) hereby end the power of attorney regarding the following files:

- ☐ the Québec Pension Plan (QPP);
- ☐ public-sector pension plans (employees of the Gouvernement du Québec's departments and public or parapublic agencies, such as the Government and Public Employees Retirement Plan (RREGOP), the Pension Plan of Management Personnel (PPMP), etc.;
- ☐ the Bureau des ententes de sécurité sociales (BESS).

Signature _____ Date year month day
(person cancelling the power of attorney)

Access to documents held by public bodies and the protection of personal information

The personal information collected on this form is needed to study your application. Failure to provide the requested information in the mandatory sections may result in a delay or a refusal to process your application. Only authorized employees have access to the information and it is only disclosed to other persons or agencies for verification in cases provided for by law. Pursuant to the *Act respecting Access to documents held by public bodies and the Protection of personal information*, you may consult your personal information and have it corrected.

For more information
By telephone

Québec Pension Plan
Québec area: 418 643-5185 Toll-free: 1 800 463-5185

Public-sector pension plans
Québec area: 418 643-4881 Toll-free: 1 800 463-5533

Send us this form and the required documents, if applicable, online at retraitequebec.gouv.qc.ca/send/en or via My Account.
Your application will be processed faster because the postal delay will be eliminated.

If you cannot use the online service, please send us the form and the required documents at the following address:
Retraite Québec, case postale 5200, Québec (Québec) G1K 7S9