

**IWA - Forest Industry
Long Term Disability Plan**

Administration Manual

October 2010



LTD

We administer:

- **IWA - Forest Industry Pension Plan**
- **IWA - Forest Industry Long Term Disability Plan ("LTD Plan")**

We also administer:

- IWA - Forest Industry Safety and Health Research and Education Trust ("H & S Fund")
- IWA - Forest Industry Education Trust Fund

The Plan Office is located at:

**Suite 150, 2955 Virtual Way
Vancouver BC V5M 4X6**

Our office is part of the Broadway Tech Centre complex, located on the south side of Broadway, bordered by Renfrew Street to the West and Nootka Street on the East. We are located on the ground floor of 2955 Virtual Way. There is parking available underneath our office building. A five minute walk straight north on Renfrew from the Renfrew Sky train station, will bring you to Virtual Way.

Phone: (604) 433-6310
Toll Free in BC: 1-800-663-4384
Fax: (604) 433-0518

You can e-mail the Contribution Administration Department at collections@iwafibp.ca.

Visit our web page at www.iwafibp.ca.

Table of Contents

Welcome

- 1. Getting Started**
 - 1.1 Company Number**
 - 1.2 Pay Period**
 - 1.3 Reporting Method**
 - 1.3.1 Our Forms**
 - 1.3.2 Your Own Forms**
 - 1.3.3 Report by Disk**
 - 1.3.4 Report by E-mail**
 - 1.3.5 E-Submit**
 - 1.4 Payment Methods**
- 2. Employees**
 - 2.1 Eligible Employees**
 - 2.1.1 Employees Over 59 ½ Years of Age**
 - 2.2 Contributory Hours Reporting Guide**
 - 2.3 Eligible Hours**
 - 2.3.1 Fractional Hours**
 - 2.4 Forms for New Employees**
 - 2.4.1 Enrolment Card**
 - 2.4.2 Employee Change of Address Card**
 - 2.5 Employee Status Changes**
- 3. Contributions**
 - 3.1 Contribution Due Date**
 - 3.2 Nil Reports**
 - 3.3 Interest Charges**
 - 3.4 Legal Action**
 - 3.5 Correcting Reporting Errors**
 - 3.6 Penalty Assessment**
- 4. Companies**
 - 4.1 Company Address Change**
 - 4.2 Company Name Change or Change of Ownership**
 - 4.3 Change of Membership in an Employer Organization**
 - 4.4 Change in Collective Agreement**
 - 4.5 Temporary Shutdown**
 - 4.6 Permanent Shutdown**
 - 4.7 Receivership or Bankruptcy**
 - 4.8 Withdrawal from the LTD Plan**
 - 4.8.1 Termination Assessment**
 - 4.9 Decertification**

- 5. Audits**
 - 5.1 What Records the Auditor Needs to See**
 - 5.2 Audit Results**

- 6. Owner Operators**
 - 6.1 Owner Operator Delinquent Accounts**
 - 6.2 Change of Ownership**

- 7. Benefits**
 - 7.1 Eligibility for LTD Benefits**
 - 7.2 Rehabilitation Services**
 - 7.3 Application for LTD Benefits**
 - 7.4 LTD Plan Booklet**

Other Sources of Information

Welcome to the IWA - Forest Industry Long Term Disability Plan

The IWA - Forest Industry Long Term Disability ("LTD") Plan was established in 1982. It is administered by a Board of Trustees appointed by USW Canada and the forest industry employers. The Plan is funded by contributions from employers and employees of BC's forest industry. Monthly benefits are provided to employees who are unable to work because of a continuing illness or injury. LTD benefits become payable once an employee has been disabled for at least 26 weeks. The Plan covers illnesses and injuries that occur both on and off the job.

Your company's participation in the LTD Plan is based on a Participation Agreement. Under the Participation Agreement you are required to follow the terms of the Trust Agreement and LTD Plan Text, which are established by the Plan's Trustees. The contribution rate you pay to the LTD Plan is determined by the Collective Agreement you negotiate with USW Canada.

This Administration Manual is designed to be a reference guide for questions about the LTD Plan, including how to go about remitting contributions, what hours to contribute for, and how to direct your employees to find out about their LTD benefits.

In any case where a dispute arises due to differences between the Administration Manual and the Plan Text or Trust Agreement, the Plan Text or Trust Agreement will govern. The full text of the LTD Plan is available to any Participating Employer upon request.

1. GETTING STARTED

1.1 Company Number

When your company becomes a Participating Employer in the IWA - Forest Industry LTD Plan, you are assigned a six-digit company number, in the format 0000-00. This number is unique to your company. Quoting your company number in all correspondence and phone calls enables us to access your account faster.

- ✦ For **Owner Operators** who have employees, two company numbers are assigned. The first four digits are the same for both, but the -00 extension refers to employees and the -55 refers to the Owner Operator.

1.2 Pay Period

Participating Employers must submit contributions to the LTD Plan at least once every 31 days. Furthermore, contributions are due 30 days after your pay period end date. Within those guidelines, your company can choose a pattern of pay periods you find most convenient. It is advisable to choose the pay period schedule that most closely matches your payroll schedule. The most popular choices are:

- ✓ by calendar month (January 1st to 31st);
- ✓ every 28 days (January 1st to 28th);
- ✓ every 14 days (January 1st to 14th, January 15th to 28th):
 - submit either one report every two weeks, or
 - two reports together, once every four weeks.

Let us know which pay period schedule you choose so that we can send out contribution reports to match your schedule. Also let us know if you need to change your pay period schedule at any time, or adjust it as needed for rate changes, year ends, etc.

Your report needs to have both a "Period Start Date" and "Period End Date" that cover the entire pay period regardless of the number of days worked in a pay period. Every day must be accounted for.

On the first page of your monthly contribution report, check that the Period Start Date we have pre-printed is correct. There may be occasions when the contribution report for the next period is mailed to you before we have received your previous one. In that case, adjust the Period Start Date. The Period End Date is left blank for you to fill in.

1.3 Reporting Method

It is up to each Participating Employer to decide if they wish to use our paper contribution reports, create their own spreadsheet or payroll reports, or report via computer disks or e-mail.

1.3.1 Our Forms

For your convenience, worksheets used to help facilitate the calculation of contributions, called "Contribution Reports" are available. Each report has two sections, the **Billing Statement** and the **Member Hours and Work Status Report**.


A

BILLING STATEMENT

This front page displays the company name, company number and complete mailing address. Adjust the Period Start Date if necessary. Fill in the Period End Date and the total hours for the pay period on this page. **The contribution rate per hour for each Plan your company participates in, is indicated.** Multiply the hours by the rate shown to get the amount owing per Plan. If your company is not required to contribute to a particular Plan, it will be marked "N/A."

This section may include an attached detailed listing of the Account Summary on Page 1.

Note: If there is any difference between the printed rate and the current Collective Agreement rate, the current Collective Agreement rate applies. You are responsible for ensuring the correct rate is applied.



IWA - FOREST INDUSTRY BENEFIT PLANS
 #150 - 2955 Virtual Way, Vancouver, B.C. V5M 4X6
 Fax. (604) 433-0518 Tel. (604) 433-6310 Toll-free in B.C. (1-800) 663-4384 E-mail: collections@iwafibp.ca

Billing Statement For : COMPANY NUMBER Statement No. : 303749
 Period Start Date : 01-JAN-2010 Statement Date : 20-JUL-2010
 Period End Date : / / *0000103478*
DD MM YYYY

COMPANY NAME
 COMPANY ADDRESS

Please check that the pay period start date is correct, and fill in your pay period end date.

SAMPLE

Please provide us with the name(s) of any company that you contract for :

WORKSHEET	PENSION	LTD	H&S	EDUCATION
Total hours reported this period :				
Times : Contribution rate : *	x 4.3000	x 1.2000	N/A	N/A
Total contributions for this period :				
Total contributions for all plans :				
TOTAL AMOUNT SUBMITTED :				

Account Summary

Plan	0 - 30	31 - 60	61 - 90	Over 90	Total
PENSION	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
LTD	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
EDUCATION	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
				Total:	\$ 0.00

If your company does not participate in any one of these plans, "N/A" will be shown.

Any underpayment, overpayment, interest or other charges will be shown here.

* If there is any difference between the printed rate and the current collective agreement rate, the current collective agreement rate applies. You are responsible for ensuring the correct rate is applied.

- Payment is due within 30 days of period end date. (Interest will be charged on all overdue amounts)
- Please make your cheque payable to the IWA - Forest Industry Pension and/or LTD Plans.

1.3.2 Your Own Forms

If you decide to use your own forms, we require the following information:

- a. Company name and company number
- b. Period start and end dates
- c. SIN and name of each employee
- d. Hours for each employee
- e. Total hours being reported and paid for
- f. Work status

You will still receive a Billing Statement and Work Status Report from our office. These are sent to you to keep you up to date regarding any debits or credits in your company's account, as well as give you the opportunity to report any employee status changes.

1.3.3 Report by Disk

The data is submitted in a simple text file rather than a spreadsheet or other formatted document file. Please contact our office for the specifications to submit by computer disk.

1.3.4 Report by E-mail

You can submit your contribution information via e-mail. The data is submitted in the form of a simple text file, zipped, and protected with a password. If you are interested in sending your reports via e-mail, please contact our office for the file specifications.

1.3.5 E-Submit

You can submit your contribution information via e-mail. The data is submitted in the form of a simple Microsoft Excel worksheet, zipped and protected with a password. If you are interested in sending your reports in this manner, please contact our offices.

1.4 Payment Methods

Cheques or money orders should be made payable to IWA - Forest Industry LTD Plan, and submitted together with your contribution report. One cheque made out to the LTD Plan may be used to cover your contributions to the Pension Plan, H & S Fund, and/or Education Trust Funds.

2. EMPLOYEES

2.1 Eligible Employees

LTD contributions must be made for all of your employees doing USW bargaining unit work who have successfully completed their probationary periods. If the employee was previously employed and covered by the IWA - Forest Industry LTD Plan in the (18) eighteen month period immediately prior to his employment with your company, then contributory hours start from the first hour the employee works.

If you have contractors working for you who do not satisfy *Canada Revenue Agency's* definition of "independent" contractors, they will be considered employees for the purposes of the LTD Plan, and contributions must be remitted for them.

If you are an Owner Operator of a company participating in the LTD Plan, see section **6 Owner Operators**.

2.1.1 Employees Over 59 ½ Years of Age

As of January 1, 2005, LTD contributions are no longer required after a member reaches 59 ½ years of age. Once our records show that an employee has turned 59 ½, an "N/A" will appear beside their name in the *Member Hours* section of your Contribution Report.

2.2 Contributory Hours Reporting Guide

The Plan Office will periodically send you an updated copy of our **Contributory Hours Reporting Guide** or you may print a copy from our website: www.iwafibp.ca. This guide lists the most common categories of hours and whether contributions are required for LTD and/or Pension.

2.3 Eligible Hours

It is important to correctly determine which hours are considered Eligible Hours under the LTD Plan. Not all hours your employees are paid for are considered Eligible Hours.

As mentioned in section 2.2 (above), the Plan Office will periodically send you an updated copy of our **Contributory Hours Reporting Guide**, a one sheet table breaking down the most common categories of hours, and whether or not contributions are required for LTD and/or Pension.

Following is the full definition of "Eligible Hours" from the LTD Trust Agreement:

- a) An employee's Eligible Hours are hours worked, following the successful completion of his probationary period or immediately if the employee was an employee with a Participating Employer in the eighteen (18) month period immediately prior to his employment with another Participating Employer, and continuing until six months prior to his attainment of sixty (60) years of age, adjusted as follows:
 - i. overtime hours at straight time hours;
 - ii. hours worked while temporarily in a class of employment not covered by a Union bargaining unit;
 - iii. hours an employee spends attending apprenticeship programs, seminars, course or training for which the employee was paid wages;
 - iv. hours spent travelling for crew bus drivers;
 - v. hours worked on a graduated return to work through the Plan;
 - vi. hours an employee is detained by his Participating Employer and for which the employee is paid call time;
 - vii. hours spent fighting a forest fire that is the responsibility of his Participating Employer;
 - viii. hours worked under an alternate work schedule or compressed work week in accordance with a Collective Agreement;

2.5 Employee Status Changes

It is important that you keep us up to date on the status of your employees. If an employee no longer works for your company, indicate whether they are (T) Terminated, (L) Laid off, (R) Retired or (D) Deceased, and let us know the date they stopped working. A list of the status codes is shown at the top of the Member Work Status Report section of your Contribution Report (see section **1.3.1 Our Forms**, on page 6).

The importance of reporting an employee status is to ensure that Plan Members are given any unfunded hours that they are entitled to, as provided by the Pension Plan Text.

3. CONTRIBUTIONS

3.1 Contribution Due Date

Contributions are due in our office 30 days after the "Period End Date" of your report. You must report at least once every 31 days. For example, reports for the period January 1st to 31st are due by March 3rd. Reports for the period January 1st to 28th are due February 28th.

3.2 Nil Reports

Even if you have no Eligible Hours to report in a pay period, a nil report must be filed. This can be submitted by e-mail, fax or mail.

3.3 Interest Charges

Interest is charged on all overdue amounts. Interest is calculated daily, compounded monthly, at the rate of one and a half times the prime rate. The rate is updated on the first business day of each calendar quarter.

3.4 Legal Action

If your account is in arrears, the LTD Plan may initiate legal action against your company to collect ALL amounts outstanding. You will be notified before such action begins. You will be responsible for reimbursing the Plan for any fees we incur to pursue such action.

3.5 Correcting Reporting Errors

Any adjustments to an employee's hours for a past pay period must be reported separately. Please do not add or subtract hours from your current billing statement. Let us know how many hours are being adjusted, which employee is affected and for which period, so we can make the appropriate changes.

3.6 Penalty Assessment

If your contributions to the LTD Plan are more than 90 days overdue and one of your employees becomes disabled before those contributions have been paid, you will be required to pay a Penalty Assessment.

Following is the definition of "Penalty Assessment" from the LTD Trust Agreement:

Penalty Assessment

- a) The term "Penalty Assessment" as used herein shall mean the amount determined by the Trustees to be the full amount or the capitalized value of compensation payable by the Trustees in respect of an injury to or an illness of a Participating Employee which must be paid to the Trustees by a Participating Employer when on the date which the Participating Employee's injury or illness first prevents him from working, the Participating Employer is indebted to the Trustees for payment of contributions for any of its Participating Employees and any portion of that liability has been owing for more than ninety days.
- b) For the purpose of the Penalty Assessment the expression "compensation payable by the Trustees" will include the cost of monthly benefits, the cost of medical, dental and extended health care coverage and the cost of any rehabilitation services provided to the disabled Participating Employee.
- c) The Penalty Assessment will be payable immediately after delivery of a written notice setting out the amount of the assessment by the Trustees to the Participating Employer.

4. COMPANIES

4.1 Company Address Change

Notify us as soon as possible if you are moving, so we can re-direct your billing statements. Similarly, if you hire an outside party to prepare your reports, please inform us of their mailing address, phone/fax numbers, e-mail address and contact name.

4.2 Company Name Change or Change of Ownership

If your company's name changes, or the company is sold to or amalgamates with another company, we need to know. If your USW operations move from one company to operating under another company, you must also let us know.

For **Owner Operators**, it is just as important to let us know if your company's status changes. For instance, Owner Operators of unincorporated companies are not eligible to participate in the LTD Plan.

Regardless of any changes to your corporate status, if your company participates in the LTD and/or Pension Plans, you must make contributions on behalf of your employees.

4.3 Change of Membership in an Employer Organization

If your company is a member of one of the forest industry employer organizations, such as Forest Industrial Relations Ltd. (FIR), Council on Northern Interior Forest Employment Relations (CONIFER), Interior Forest Labour Relations Association (IFLRA) or Inland Forest Construction Group, it is important that you notify our office if your membership in that organization ceases. Certain obligations to the LTD Plan that apply to these member organizations may no longer apply to your company.

4.4 Change in Collective Agreement

Each new Collective Agreement your company enters into with USW may have an effect on your participation in the LTD Plan. Since the Plan Office is not a party to the Collective Agreement, we ask that you to let us know when your company reaches a new Collective Agreement or signs a Memorandum of Agreement that concerns the LTD Plan.

4.5 Temporary Shutdown

If your company temporarily shuts down, you must submit nil reports for each pay period during the shutdown. This is the easiest method if the shutdown is not expected to last very long. However, if you anticipate the shutdown will continue for quite some time, contact our office and we can arrange to stop sending billing statements. We will follow up with you at agreed-upon intervals from three months to one year's time. If you resume operations earlier than expected, contact our office and we will send out billing statements.

4.6 Permanent Shutdown

Please notify us in writing if your company shuts down permanently. All contributions must be paid in full before your account can be closed. You are still obligated to contact the Plan Office if you resume operations in the future, regardless of the length of time your company is closed.

4.7 Receivership or Bankruptcy

If your company goes into receivership or files for bankruptcy, let us know.

4.8 Withdrawal from the LTD Plan

A withdrawal from the LTD Plan must be negotiated between your company and your union local. You cannot withdraw retroactively. Notify us immediately if a withdrawal is negotiated.

4.8.1 Termination Assessment

If an employer ceases to participate in the LTD Plan due to withdrawal, decertification, or relocation of business to another Canadian province, the USA or Mexico, the employer will be required to submit payment to the Trustees of an amount determined to be that employer's share of the unfunded liability of the LTD Plan at the time participation ceases. The amount owing is determined by a formula set out in the LTD Plan Trust Agreement.

4.9 Decertification

If your employees vote to decertify from the USW, your company's participation in the IWA - Forest Industry LTD Plan will end. Notify us immediately if your company has decertified. The termination assessment described in section **4.8.1 Termination Assessment** (above), will apply.

5. AUDITS

All Participating Employers are audited at least once every five years. We have an obligation to ensure that members are receiving the coverage they are entitled to, and to ensure compliance with the Plan rules.

All information obtained in an audit is kept confidential.

5.1 What Records the Auditor Needs to See

When your company is selected for an audit, you will be informed by mail. We include a listing of required documents at that time. These could include but are not limited to time sheets, T4s and the payroll register. One of our field auditors will then contact you by phone to arrange a convenient time to examine your payroll records.

5.2 Audit Results

Once the audit has been completed in the field, the results are analyzed by the Plan Office. You will receive a full breakdown of any discrepancies.

If an audit reveals an overpayment of contributions, credits will be applied to your company's account.

6. OWNER OPERATORS

To be considered an Owner Operator as defined in the LTD Plan, you must satisfy the following definition:

- ✓ you own at least 10% of the voting shares of an incorporated company,
- ✓ your company is a Participating Employer in the IWA - Forest Industry LTD Plan,
- ✓ you are employed in the forest industry in an USW bargaining unit position,
- ✓ you perform such bargaining unit work at least 75% of your normal work month, and
- ✓ you are a member of the USW or the USW is your bargaining agent.

In order for Owner Operators to be eligible for coverage under the LTD Plan, the Owner Operator must successfully complete his/her probationary period as defined in their Collective Agreement or have been previously covered by the IWA-Forest Industry LTD Plan in the eighteen (18) months prior to becoming an Owner Operator, then contributory hours start from the first hour the Owner Operator works.

6.1 Owner Operator Delinquent Accounts

If contributions are delinquent 90 days past the contribution due date, an Owner Operator may have his coverage under the LTD Plan terminated (see section **3.1 Contribution Due Date**). Once coverage has been terminated, the Owner Operator will not be eligible to participate in or receive benefits from the LTD Plan, and will remain ineligible for as long as he continues to be an Owner Operator.

This provision only affects Owner Operators. Employees of the terminated Owner Operator will continue to be covered and contributions are required to be made on their behalf.

6.2 Change of Ownership

It is important to let us know if the ownership of your company changes. If you sell a portion of your business to someone else, that person may qualify as an Owner Operator as described in section **6 Owner Operators**.

7. BENEFITS

All of the employees for whom you have been making LTD contributions should be made aware of the benefits they are entitled to if they become ill or are injured. Other than the basic requirement for coverage in the LTD Plan set out in **2.1 Eligible Employees**, there are a number of other conditions that must be met before such an employee becomes eligible for benefits from the LTD Plan.

7.1 Eligibility for LTD Benefits

- ✓ Member is unable to work at his/her normal occupation for the duration of the Qualification Period:
 - ↳ Qualification Period means the greater of the first 26 weeks of a Disability Period or that length of time during a Disability Period in which a Disabled Employee is receiving Workers' Compensation Wage Loss Benefits or the maximum duration provided under a weekly indemnity benefit on account of his or her Disability; *and*
- ✓ Member has applied for Employment Insurance sick benefits and has either:
 - ↳ Received all benefits entitled to, *or*
 - ↳ Been declared ineligible; *and*
- ✓ Member is under regular care of medical doctor; *and*
- ✓ Member is disabled as defined under the terms of the LTD Plan; *and*
- ✓ Member has applied for CPP disability benefits.

7.2 Rehabilitation Services

The LTD Plan offers rehabilitation services that may begin long before a member is eligible to receive LTD benefits. Starting the rehabilitation process early increases the likelihood the member will be able to successfully return to work. Depending on the nature of the disability, the member may be contacted as early as 3 months after the date of disability to discuss rehabilitation options. The rehabilitation counsellor may require information from the employer to develop an appropriate rehabilitation program. If your company has a disability management program in place, our rehabilitation counsellor will coordinate our program with yours.

The **Rehabilitation Services Plan Leaflet** is also available for download at our website, www.iwafibp.ca.



7.3 Application for LTD Benefits

Members who are receiving short term disability benefits from their weekly indemnity carrier (eg., BC Life or other carriers) should receive an application for LTD benefits during the 10th week of their disability. Members who have completed WCB wage loss, rehabilitation and/or income continuity benefits, should contact our office so we can send them an application package.

Included in the package is a form to be completed by the employer. Please contact our office if you have any questions about how to fill out this form.

IWA - FOREST INDUSTRY LTD PLAN
 Sola 151 - 2963 Village Way, Nanaimo, BC V9M 4G5 - 404-433-6310
 Long Distance Toll-Free Calls: BC Only - 1-800-663-4384

OFFICE USE ONLY
 Company #: _____
 Plan E. Date: _____

Long Term Disability Benefits Claim Form: EMPLOYER (Please type or print)

Name of Claimant: _____ (Last) _____ (First) _____ (Initial)

Social Insurance No. _____

Date of Birth: _____ Day Month Year Date Last Worked: _____ Day Month Year

Date of Disability: _____ Day Month Year Seniority Date: _____ Day Month Year

1. Regular Job Title on date last worked: _____
 a) Briefly describe the job demands including requirements such as lifting, bending, standing and walking. Also attach a job description and physical demands analysis, if available.

 b) Titles of jobs held by claimant within last 5 years:

2. Is the claimant receiving weekly indemnity? Yes No
 Who processes weekly indemnity? BC Life Forest Industry Disability Other: _____
 Adjudication Service
 Name of Health & Welfare Plan: _____ Group #: _____

3. Is Workers' Compensation wage loss or a disability award payable?
 a) Payable from: _____ Day Month Year Claim Number: _____
 b) If payments stopped, date to which paid: _____ Day Month Year
 c) Has an Appeal been filed? Yes No Date Appeal filed: _____ Day Month Year

4. If claimant is not eligible for either Workers' Compensation benefits or weekly indemnity benefits, please explain why not:

1 of 2

Long Term Disability Benefits Claim Form: Employer - Page 2

5. Date last LTD contribution paid for claimant: _____ Day Month Year

6. Who is the company contact for return-to-work issues? _____ Telephone No.: _____
 Do you have a transitional work program or joint disability management program?

 Has a work accommodation been offered prior to the employee's absence? If so, what was the result?

 Does the employee's job still exist and is it available upon recovery?

7. COMMENTS (Please provide any additional information relevant to this claim).

8. Employee's MSP, EHB and Dental coverage will cease: _____ Day Month Year

9. Name of Employer: _____
 Address of Employer: _____
 Email: _____
 Telephone Number: _____ Company Number: _____

EMPLOYER'S STATEMENT OF CONFIDENTIALITY
 The information contained in this Long Term Disability Benefits Claim Form: Employer and any additional medical information provided to the IWA - Forest Industry Long Term Disability Plan, is collected for the purpose of reviewing the status of this claim or any related matters dealing with the Workers' Compensation Board. The information will only be disclosed to persons or organizations involved with this claim or as may otherwise be lawfully required or as I may further authorize.
 _____ day of _____ Month _____ Year

Authorized Signatory _____ Name and Title (please print) _____

2 of 2

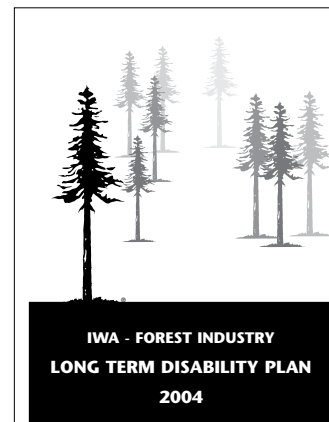
7.4 LTD Plan Booklet

This **booklet** provides a summary of the LTD benefits and rehabilitation services members are eligible for if they become disabled. The booklet also contains instructions about how and when to apply for LTD benefits, as well as other information members need to know before they apply for LTD benefits. You can contact our office for copies of the **LTD Plan Booklet** which is also available on our website.

Other Sources of Information

For further information about the IWA - Forest Industry LTD Plan, please refer to the following:

- ✓ **Contributory Hours Reporting Guide**
- ✓ **LTD Plan Booklet**
- ✓ Employer Newsletter
- ✓ Collective Agreement
- ✓ www.iwafibp.ca





IWA-Forest Industry Long Term Disability Plan

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