NEW YORK CITY FIRE PENSION FUND
One Battery Park Plaza – 9th Floor
New York, New York 10004-1405
(929) 436-0099

FOR YOUR OWN SECURITY WE CANNOT PROCESS IF FORM IS FAXED

CHANGE OF ADDRESS FORM

Personal information to be supplied by pensioner: (please print)

Pension Number: ☐☐☐☐☐☐ **Social Security Number (last 4 digits):** ☐☐☐☐

Name: _____

EFFECTIVE DATE OF ADDRESS CHANGE: _____

(NEW)
STREET ADDRESS _____

City, State, Zip Code: _____

Home Telephone: _____ **Cell:** _____

CANCEL ELECTRONIC DEPOSIT? (check one) ☐ **YES** ☐ **NO**

(PREVIOUS)
ADDRESS _____

City, State, Zip Code: _____

THIS FORM MUST BE ACKNOWLEDGED BEFORE A NOTARY PUBLIC OR COMMISSIONER OF DEEDS

SIGNATURE: _____

State of _____ **County of** _____

On this _____ **day of** _____ **20**_____, **personally appeared before me the said**

_____, **to me known to be the individual described in and who executed the foregoing instrument and he/she duly acknowledged to me that he/she executed the same.**

Signature of Notary Public or Commissioner of Deeds _____

Official Title _____

Expiration Date of Commission _____

Official Seal

7/29/19