

Law Firm/Professional Corporation (PC) Application for DBplus

A. Firm information						
Firm/PC legal name	Date firm was created					
Jurisdiction governing employment of employe						
□ Federal □ Provincial □ Indicate province Other						
FIRM CONTACT INFORMATION						
Last name	First name	Job title				
Street number and name	City/town	Province	Postal code			
Telephone number	Email address					
B. Current plan information						
If the firm has an existing retirement savings plan, indicate the type (check all that apply)	 Defined Contribution Pension (DC) Defined Benefit Pension (DB) Group Registered Savings Plan (RRSP) Deferred Profit Sharing Plan (DPSP) 					
C. Employee information						
Total number of employees joining the Plan	Average age of employee pop	oulation joining the	Plan			
List the status and number of employees other than regular full-time employees (e.g. part-time, on leave, on disability, maternity leave, etc.)						
Employee status	Number of employees					
D. Additional information about joining the DBplus plan						
When do you anticipate launching DBplus and beginning contributions?						
🗅 As soon as possible 🗅 Within 3 months 🗅 Within 6 months 🗅 Within one year 🗅 Over a year						
Provide a specific desired launch date						

Select the desired contribution rate between 5% - 9% $\%$						
Enter the employer and employee matching contribution rate						
Legal employee% Non-legal employee%						
Other (please describe)	Contribution rate	%				

Will any class of employee be excluded from participating in DBplus?

🛛 Yes 🗳 No

If yes, which class of employee will be excluded? 🗅 Legal employee 📮 Non-legal employee 📮 Other

Note: All full-time employees of a given class must join. Exception may apply if employees are part of a bargaining group.

CONTRIBUTION RATE PHASE-IN

The Contribution Rate Phase-In allows the contributions to start at a lower percentage and increase each year until the desired rate (noted above) is reached. Once reached, the contribution rate remains consistent from there on.

Indicate whether there will be a contribution phase-in

I Yes, one or more classes of employees will have a contribution phase-in

□ No, there will not be a contribution phase-in

If yes, check the appropriate box to indicate the starting contribution rate between 3% - 8%

Class of employee	3%	4%	5%	6%	7%	8%
Legal employee						
Non-legal employee						
Other (please describe)						

The annual increase of participating employer and employee contributions during the contribution phase-in periods will take effect at the beginning of each calendar year until the desired rate is achieved. Note that as always, the employee and employer contributions must match.

Please select the annual percentage increase (until the desired contribution rate is achieved)

□ 0.5% □ 1.0% □ 1.5% □ 2.0% Other ____%

E. Additional documents

A Participation Agreement will be signed between the employer and the CAAT Pension Plan.

The following documents may also be required:

Copy of financial statements
 Business credit report (if applicable)

Signature	Date	
Print name	Title	Telephone number

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