



Agreement to administer benefits under the Old Age Security Act and/or the Canada Pension Plan by a Private Trustee

Trustees must maintain yearly records of the monies received and spent for our beneficiaries. Should the Minister want an accounting report, the trustee must provide the requested documentation for the applicable year(s).

It is very important that you:

- use a **pen** and **print** as clearly as possible.

Beneficiary's Social Insurance Number

The information contained on this form is essential for payments of benefits under the *Old Age Security Act* and/or the *Canada Pension Plan* to persons acting on behalf of a beneficiary who is incapable of managing his/her own affairs. It is retained in the information bank relating to the benefit being paid. Under the *Privacy Act*, the beneficiary has the right to request a copy of this record.

Old Age Security and/or Canada Pension Plan beneficiary

<input type="radio"/> Mr. <input type="radio"/> Mrs. Usual First Name and Initial <input type="radio"/> Ms. <input type="radio"/> Miss	Last Name
Home Address - No., Street, Apt., P.O. Box, R.R. and City	Province or Territory
	Country - If other than Canada Postal Code

I, the undersigned, agree to receive benefits under the *Old Age Security Act* and/or the *Canada Pension Plan* payable to the beneficiary named above and undertake, following the relevant provisions and Regulations, without charge:

1. to act on behalf of the beneficiary and, in accordance with any directions, from Human Resources and Skills Development Canada, to administer and expend the benefits in his/her best interests;
2. to complete an accounting report for all benefits received and the payments made from them, upon request from Human Resources and Skills Development Canada;
3. to notify Human Resources and Skills Development Canada if the beneficiary changes address, becomes absent from Canada, dies, ceases to be incapable of managing his/her own affairs or if the trusteeship ends. And to provide any other information or evidence, and to do anything that the *Old Age Security Act* and/or the *Canada Pension Plan* or their Regulations would require from the beneficiary; and
4. to return uncashed, if the beneficiary should die, all his/her *Old Age Security* and/or *Canada Pension Plan* benefit payments which remain uncashed at the time of his/her death or which may be issued after the month of death, and to reimburse Her Majesty the Queen in Right of Canada for any loss sustained by her through the cashing of such payments.

NOTE: If you make a false or misleading statement, you may be subject to an administrative monetary penalty and interest, if any, under the *Canada Pension Plan* or the *Old Age Security Act*, or may be charged with an offence. Any benefits you received or obtained to which there was no entitlement would have to be repaid.

IN WITNESS WHEREOF, I execute this document under seal this _____ day of _____ of the year _____ .

X _____ <p style="text-align: center; margin-top: 5px;">Signature of Trustee</p>	Signed, Sealed and Delivered in the presence of X _____ <p style="text-align: center; margin-top: 5px;">Signature of Witness</p>
Name of Trustee - Please print	Name of Witness - Please print
Address of Trustee - No., St., Apt., P.O. Box, R.R.	Address of Witness - No., St., Apt., P.O. Box, R.R.
City, Town or Village	City, Town or Village
Province or Territory	Province or Territory
Country	Country
Postal Code	Postal Code
Telephone number	Telephone number
Relationship, if any, to the Beneficiary	Occupation of Witness

Service Canada delivers Human Resources and Skills Development Canada programs and services for the Government of Canada.

Service Canada Offices

Canada Pension Plan

Mail your forms to:

The nearest Service Canada office listed below.

From outside of Canada: The Service Canada office in the **province where you last resided**.

Need help completing the forms?

Canada or the United States: **1-800-277-9914**

All other countries: **613-990-2244** (we accept collect calls)

TTY: **1-800-255-4786**

Important: Please have your social insurance number ready when you call.

NEWFOUNDLAND AND LABRADOR

Service Canada
PO Box 9430 Station A
St. John's NL A1A 2Y5
CANADA

PRINCE EDWARD ISLAND

Service Canada
PO Box 8000 Station Central
Charlottetown PE C1A 8K1
CANADA

NOVA SCOTIA

Service Canada
PO Box 1687 Station Central
Halifax NS B3J 3J4
CANADA

NEW BRUNSWICK AND QUEBEC

Service Canada
PO Box 250 Station A
Fredericton NB E3B 4Z6
CANADA

ONTARIO

For postal codes beginning with "L, M or N"

Service Canada
PO Box 5100 Station D
Scarborough ON M1R 5C8
CANADA

ONTARIO

For postal codes beginning with "K or P"

Service Canada
PO Box 2013 Station Main
Timmins ON P4N 8C8
CANADA

MANITOBA AND SASKATCHEWAN

Service Canada
PO Box 818 Station Main
Winnipeg MB R3C 2N4
CANADA

**ALBERTA / NORTHWEST TERRITORIES
AND NUNAVUT**

Service Canada
PO Box 2710 Station Main
Edmonton AB T5J 2G4
CANADA

BRITISH COLUMBIA AND YUKON

Service Canada
PO Box 1177 Station CSC
Victoria BC V8W 2V2
CANADA

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