



City of Austin
Police Retirement System

Active Member Request for Service Purchase Calculation Application

If you are interested in a calculation for the purchase cost of Creditable Service, please complete the information below and return to the Retirement Office. Following verification of information and eligibility of purchase, the Pension Office will provide a calculation to you. No refunds are allowed once funds have been received for a Creditable Service purchase.

Name: _____ SSN: _____

Address/City/State/Zip Code: _____

Daytime Phone: _____ E-mail _____

Proportionate Service

Have you ever been a member of a proportionate system? [] yes [] no

Proportionate Service may affect the cost of this service purchase and is subject to verification before completion of your purchase.

Total Proportionate Service _____ years _____ months

(Please check all that apply.)

- [] ERS of Texas (state) [] TMRS (other cities in Texas) [] TRS (teachers' retirement)
[] El Paso Firemen & Policemen's Pension Fund [] COAERS (City of Austin) [] TCDRS (counties)
[] The El Paso City Employees' Pension Fund [] Judicial Retirement Systems of Texas, I & II

Select the type or types of calculations you would like to request indicating the number of months you would like your calculations to include. The date of purchase must be within 30 days of the date your request form is received or the request process must start over and the cost of your purchase will be re-calculated. If no months are indicated, your calculation will be prepared including all months you are eligible to purchase. Approximate service dates of month and year should also be provided.

[] Cadet Service

of months to purchase _____
Service From: _____ Service To: _____

[] Pre-Membership Military Service (must provide DD-214)

of months to purchase _____
Service From: _____ Service To: _____

[] Forfeited Service (Prior City of Austin Police Retirement System Service)

of months to purchase _____
Service From: _____ Service To: _____

[] Permissive Service

of months to purchase _____

By signing below, I verify that the above information is true and correct. I also understand that all calculations are subject to audit and correction. Furthermore, I understand that if my request is received after the 25th of the month, an estimate will be calculated using the next month's purchase cost.

Member Signature

Date