



Irrevocable Consent to Deduct and Pay an Insurer

Instructions: Please read the Information Sheet on pages 3 and 4 before completing Section 1 of this form. Your insurer completes Section 2.

Section 1 - Your Consent to Deduct and Pay a One-time Retroactive Canada Pension Plan (CPP) Disability Payment to an Insurer

Your first name (Please print)

Your last name

Your Social Insurance Number

I have read the Information Sheets on pages 3 and 4. If my application for CPP Disability benefits is approved, I understand that:

- An amount payable to my insurer will be deducted from the retroactive payment of my CPP Disability benefits and Service Canada will make no further payments directly to my insurer after that time.
- My insurer will be reimbursed only for those months where both CPP Disability benefits and disability insurance benefits were payable and the reimbursement payment will not exceed any amounts paid by my insurer during that period.
- My consent is not valid if received by Service Canada more than one year after I have signed it.
- My consent to pay a one-time retroactive CPP Disability payment to my insurer is irrevocable, which means that, once signed, I cannot cancel my consent at any time.

By signing this form, I hereby give my irrevocable consent for Service Canada to pay a one-time retroactive CPP Disability payment to the insurer named in Section 2 of this form.

I am (*check one*):

- the person named above a legal representative of the person named above

Signature

Year Month Day

Note, if you do not want to give your consent for Service Canada to pay a one-time retroactive CPP Disability payment to your insurer, do not sign this form and advise your insurer.

If you do sign, keep a photocopy for your records and return pages 1 and 2 to your insurer. The insurer will complete Section 2 and send the form to the nearest Service Canada Centre.

Protecting your privacy: Service Canada cannot give your personal information to any person or organization without your written consent, except where authorized by CPP legislation. You (or your legal representative) have the right to request a copy of the information in your file at any time.

IMPORTANT: You can obtain an application for CPP Disability benefits by calling Service Canada at 1-800-277-9914 or you can print the application from the Internet at: servicecanada.gc.ca

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Section 2 - Insurer Information (to be completed by insurer)

Legal name of insurer (as it appears in the Approval, Deduction and Payment Agreement with HRSDC)
(Please print)

Mailing address

City

Province or Territory

Postal Code

Insurer contact name (Please print)

Telephone number

Fax number

Note to insurer: Mail completed sections 1 and 2 of this form to the nearest Service Canada Centre address listed on page 5.



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Why would I give permission for Service Canada to reimburse my insurer?

Your disability insurance policy allows your disability insurer to reduce the monthly payment amount it pays you by the amount of your CPP Disability benefit.

This also means that your insurer is entitled to recover some or all of the benefits paid to you for the period when both benefits were payable. The payment cannot exceed the amount of disability insurance benefits paid to you.

By giving Service Canada permission to reimburse your insurer directly, you will avoid having to pay back your insurer yourself. In other words, this eliminates a payment you would otherwise owe to your insurer.

If you would like more information on this before making a decision, please discuss it with your insurer.

What does "irrevocable" consent mean?

Irrevocable consent means that you cannot change or withdraw it after signing the consent form and your insurer must send the form to Service Canada within one year of your signature for it to be valid.

Are there any other payments that Service Canada would make directly to my insurer?

No. This is a one-time reimbursement payable to your insurer from your retroactive CPP

Disability benefit payment and no other payments will be made directly to your insurer.

Please note Service Canada will not reimburse your insurer:

- if your insurer reduces their benefit payments to you by the amount of the CPP Disabled Contributor's Children's Benefits that your children are entitled to
- if your insurer reduces the benefit payment to you by a presumed CPP Disability benefit amount before a decision is made on your CPP Disability application
- or when both conditions apply

Can I choose not to give my consent?

Yes. If you choose not to give your consent, do not sign this form and advise your insurer accordingly.

Service Canada will then send you any retroactive CPP Disability benefits you may be eligible to receive and you will be responsible for reimbursing your insurer for the period when you were eligible for both CPP Disability and disability insurance benefits.

Are my CPP Disability benefits taxable?

Yes. Your CPP Disability benefits, including any amount paid directly to your insurer for a retroactive period, are taxable income under the *Income Tax Act*.



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Am I eligible for the Disability Tax Credit?

People with severe disabilities can claim a tax credit to reduce the amount of income tax payable. To find out if you are eligible, contact the Canada Revenue Agency at:

- 1-800-959-8281
- 1-800-665-0354 (TTY)
- or by Internet at cra.gc.ca/disability/

How long will my consent remain valid?

If your insurer sends this form to Service Canada within 12 months of the date you signed it, you cannot cancel your permission for Service Canada to send a one-time retroactive payment directly to your insurer.

If you have questions about CPP Disability, contact Service Canada:

By telephone

- 1-800-277-9914 (English)
- 1-800-277-9915 (French)
- 1-800-255-4786 (TTY)

By telephone for residents of other countries

- 613-990-2244 (we accept collect calls)

By Mail

- see page 5

By Internet

- servicecanada.gc.ca



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
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