

WORK SHEET for DECEASED MOS

FIRST NAME _____ MI _____ LAST _____

SPOUSE NAME _____ Address _____
City _____ St _____ Zip _____

Pension # Starts w/ Cap P _____ top right side Electronic
Quarterly Statement

SS # _____ RANK _____ Last
Command _____

HOME PHONE _____ CELL _____ EMAIL _____

From the Pension Rep.: www.nefl1013.com/
THE BELOW ARTICLE WAS WRITTEN BY

**MARIE BRUSCO AND LINDA LACHICK, POLICE PENSION
FUND**

Few situations in life are more stressful than when a spouse passes. All too often we have a difficult time focusing on the issues at hand and need guidance to get the deceased affairs in order. The following is a general guide for the widow/er regarding important notifications that must be made by the surviving spouse and information you should have on hand when a retiree dies.

[Operations Unit 646 610 5580](#) calling to report the death of a retired police officer and are requesting **NYCPD FLAG** for casket & Pallbearers for his funeral. IN (all five boroughs, all of Long Island and Upstate New York but **NOT** beyond Dutchess County.) Can ALSO Request **DEPT FLAG** for funerals OUTSIDE of above areas. Give FIRST, MIDDLE and LAST NAME, DATE OF DEATH, **SOCIAL SECURITY**, **MEMBERS TAX #**, RANK, LAST COMMAND, NEXT of KIN.

Notify the NYC Police Pension Fund either in Writing or by Telephone.

The address is 233 Broadway, 19th Floor New York, New York 10279 **Attention: Retiree Death Benefits Unit** Telephone (212) 693- 5607 / 5919 (for members appointed after June 30, 1940 and for members who merged from **Transit/Housing** as of May 1995).

- You will have to PROVIDE the deceased First, Middle and Last name, the date of death, SOCIAL SECURITY number, next of kin as well as the executor/trix of the estate and his/her address and phone number.
- To COMPLETE complete our records you will need a COPY of the Will, a copy of the paid Funeral bill, the **Original or Certified COPY** of the **Death certificate** and a certified copy of your **MARRIAGE certificate** as well as YOUR SOCIAL Security number.

These documents are necessary for any benefits that might be due you as per the member chosen options.

- Contact the appropriate **UNION** for a possible existing LIFE insurance policy and also for Continuation of ***4 optional benefits***, if qualified.

Police Officers-Patrolmen's Benevolent Association (P.B.A) (212) 233-5531

Detectives-Detectives' Endowment Association (D.E.A.) (212) 587-9120

Sergeants- Sergeant's Benevolent Association (S.B.A.) (212) 431-6555

Lieutenants and above-Superior Officers Council (S.O.C) (212) 964-7500

- Contact the NYC **HEALTH** Benefits Program for Special Continuation of Coverage Application (Coverage for **LIFE**) located at (**NEW**) **22**

Cortlandt St. 12th Floor, New York, NY 10007: NEW (212) 306-7200 (Gen Info)

There are no words of comfort at such a difficult time, however if you have all the necessary information at the ready it will expedite any claim that is pending, make the process run smoothly and your stress level can be minimized.

You will have to provide the **Deceased First, Middle and Last name, the date of death, social security number, next of kin** as well as the executor/trix of the estate and his/her **address and phone number**.

To complete our records you will need a COPY of **the will, a copy of the paid funeral bill, the original or certified copy of the Death certificate and Marriage certificate** as well as (**SPOUSE Social Security #**. These documents are necessary for any benefits that might be due you as per the member chosen options.

Att **Linda Harris**

They will send the surviving spouse a **pre-numbered application** allowing the spouse to continue the health coverage that the member had at a **cost equal to 102%** of what the City pays, which includes admin fees.

GENERAL GUIDE FOR THE WIDOW/er OF A RETIRED MOS CLICK > <https://www.nefl1013.com/GEN-GUIDE>

Feel free to contact me C 407 417 7779 Pension
rep www.nefl1013.com/

Thanks **MARIE** and **LINDA**

Eddie Woods
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www.nefl1013.com/

