Information

Retraite Québec

Declaration of the De Facto (common law) Spouse or Spouse in a Civil Union

Public-Sector Pension Plans

Information

You must use this form to declare your status as a de facto (common law) spouse or spouse in a civil union, as specified under the provisions of various public-sector pension plans.

In addition to this form, you must send clear and legible copies of the requested documents. If necessary, we may require the originals or certified true copies.

De facto (common law) spouse

To be recognized as a de facto (common law) union, neither spouse must have been married to or in a civil union with another person at the time of death, except in the case of certain plans[1].

Required period of conjugal relationship[2]

At the time of death, the spouses must have lived in a conjugal relationship for:

- **at least three years;**
  OR
- **one year if**, during the union:
  - a child was born or is to be born of the union, **or**
  - the spouses adopted a child together, **or**
  - one of them adopted the other's child.

If the application concerns the Superannuation Plan for the Members of the Sûreté du Québec (SPMSQ), the spouses must have been in a conjugal relationship for one year, or less than one year if a child has been born or adopted.

Persons in a civil union

Persons in a civil union must qualify as de facto (common law) spouses within the meaning of the federal *Income Tax Act* to be covered under the provisions of public-sector pension plans.

For their union to be recognized, both spouses must have been **living in a conjugal relationship**[2] **and at least one of the following conditions must have been met** at the time of death:

- they had been living in a conjugal relationship for at least one year; **or**
- they were the parents of the same child by birth or adoption; **or**
- one of the spouses had custody and control of the other spouse's child (or had custody and control immediately before the child turned 19 years of age).

1. Information on the deceased

Social Insurance Number **or** Identification number	The identification number can be found on the Statement of Participation of the deceased or on his or her document entitled Your Pension.
1 7	

Family name	Given name

2. Information on the surviving spouse

Family name	Given name	Social Insurance Number

Information on the surviving spouse's marital status

2.1 Have you ever been married or in a civil union? ☐ Yes ☐ No

1. If the application concerns the Pension Plan of Certain Judges of Québec (PPCJQ) or the Pension Plan of Certain Judges Appointed Before 1 January 2001 (PPCJBJ), only the judge must not be married to or in a civil union with another person at the time of his or her death.
2. By *conjugal relationship*, we mean: living together, publicly presenting yourself as spouses and providing each other with mutual support.

If you were the deceased's de facto (common law) spouse at the time of his or her death, and you have never been married or in a civil union with another person, you must check **Single** under marital status in the following question.

2.2 What was **your** marital status **at the time of death?**

Marital status	Information or documents to be provided
☐ **Married** (religious or civil ceremony)	Name of spouse: _____
☐ **Widowed**	Proof of death of the legal spouse or copy of the act of death
☐ **Legally separated**	Name of spouse: _____
☐ **Divorced**	Certificate of divorce, certificate of non-appeal of the judgment of divorce, or decree absolute of divorce
☐ **In a civil union**	Name of spouse: _____
☐ **Dissolved civil union**	Judgment of dissolution or notarized joint declaration of dissolution of civil union
☐ **Single**	

If you checked **Widowed** or **Divorced**, please provide the following information:

Name of spouse: _____

Date of death or divorce, as the case may be: year month day

In the case of a divorce, enter the city where it was rendered: _____

3. Information on the place of residence

3.1 When did you and the deceased start living in a conjugal relationship? year month day

After that date, were there any periods of time during which you did not live together?

☐ Yes ☐ No

If so, specify the periods:

From year month day to year month day Reason: _____

From year month day to year month day Reason: _____

3.2 Starting with the most recent, give the addresses at which you and the deceased lived in a conjugal relationship during the required period. (If necessary, see the Information section at the top of the form to determine the required period.)

First address: _____

From year month day to year month day

Second address: _____

From year month day to year month day

Third address _____

From year month day to year month day

3.3 During the required period, did you and the deceased receive all your mail at the same address? ☐ Yes ☐ No

If not, give all **other** mailing addresses at which you received your mail and the reason for each:

Your mailing address: _____

Reason: _____

The deceased's mailing address: _____

Reason: _____

4. Information about the children

During your union with the deceased, were any children born, to be born or adopted?

☐ Yes ☐ No

If so, please provide the following information:

Dependent children	Document to be provided
☐ **Child to be born**	Document attesting to pregnancy signed by a physician (only for de facto (common law) spouses)
☐ **Child born**	Birth certificate or copy of an act of birth containing the names of both parents[1]
☐ **Child adopted together or one of the spouses adopted the other spouse's child**	Adoption judgment
If you have more than one child, we require proof of one child only.	

If you and the deceased were in a civil union, please answer the following question:
Did one of you have custody and control of the other's children?

☐ Yes ☐ No

5. Witnesses

By entering the required information in this section, you authorize Retraite Québec to contact the persons named herein to confirm the accuracy of the information provided on this form.

5.1 Please provide the contact information of **a close relative of the deceased with whom he or she had regular contact**, excluding your children (father, mother, brother, sister, child of another union, nephew, niece, cousin).

Family name	Given name
Address	
Telephone (day) area code	Telephone (other) area code / Extension
Relation to the deceased: _____	

1. All documents issued in Québec after 1993 relating to birth must be those issued by the Directeur de l'état civil (registrar of civil status).

5.2 Please provide the contact information of **two people to whom you are not related and who were not related to the deceased**, but had regular contact with the deceased. The individuals must not live at the same address and must be able to confirm the information provided in this declaration.

First witness

Family name	Given name
Address	
Telephone (day) area code	Telephone (other) area code / Extension

Second witness

Family name	Given name
Address	
Telephone (day) area code	Telephone (other) area code / Extension

6. Proof of cohabitation to be provided

You must provide us with proof of shared residence from different sources in order to confirm your status as de facto (common law) spouse for the required period**.** (If necessary, see the Information section at the top of the form to determine the required period.)

To prove three years of conjugal relationship, please provide proof of cohabitation for each of the following periods:

- the month in which the death occurred;
- one year prior to the death (approximately);
- two years prior to the death (approximately);
- the 36th month prior to the death.

To prove one year of conjugal relationship, please provide proof of cohabitation for each of the following periods:

- the month in which the death occurred;
- the 12th month prior to the death.

The documents must show the following information:

- the name of one or both spouses;
  If the documents do not show the names of both spouses, you must provide a document for each spouse, including information that is consistent with the information on the document of the other spouse.
- residential address;
- the date on which the document was issued.
  The **issue date of the document** must correspond to the period for which proof is required.

The following documents are examples of acceptable proof: income tax slips (T4, RL-1 slip, RL-2 slip), notice of assessment, tax notice, insurance contract, telephone bill or invoice, hydro bill or invoice, etc.

If the period of cohabitation is interrupted due to illness of one of the spouses, you must provide proof justifying the interruption of cohabitation for health reasons. The document must be signed by the attending physician, a caregiver or a person representing the management of a healthcare facility who can testify thereto.

7. Declaration

By sending this form, I declare that the information provided is complete and accurate.

Access to documents held by public bodies and the protection of personal information

The personal information collected in this form is necessary to study the application. Failure to provide the requested information in the mandatory sections may result in a delay or a refusal to process your application. Only our authorized employees will have access to it when necessary to carry out their duties and it is only disclosed to other persons or agencies for verification in cases provided for by law. Pursuant to the *Act respecting Access to documents held by public bodies and the Protection of personal information*, you may consult your personal information and have it corrected.

For more information

Online
retraitequebec.gouv.qc.ca

By telephone
Québec region: 418 643-4881 Toll-free: 1 800 463-5533

Send us this form and the required documents, if applicable, online at retraitequebec.gouv.qc.ca/send/en or via My Account.
Your application will be processed faster because the postal delay will be eliminated.

If you cannot use the online service, please send us your documents at the following adress:
Retraite Québec, case postale 5500, succursale Terminus, Québec (Québec) G1K 0G9