



INDUSTRIAL CARPENTERS' BENEFIT PLAN

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**INDUSTRIAL CARPENTERS' BENEFIT PLAN
GENERAL INFORMATION FOR MEMBERS**

WHAT BENEFITS AM I ENTITLED TO?

FULL COVERAGE

- 1. Basic Medical and Surgical Coverage provided by the Medical Services Plan of BC**
- 2. Extended Health Care Benefits**
- 3. \$400 per week Wage Indemnity Benefit**
- 4. Dental/Optical Reimbursement Program**
- 5. Employee Assistance**
- 6. \$50,000 Group & Accident Life Insurance**
- 7. \$8,000 Spouse Insurance**
- 8. Hour Bank Credits**

HOW DO I QUALIFY FOR COVERAGE?

1. You must be a Member of a Carpenters' Local Union affiliated with the CMAW Provincial Council of Carpenters.
2. You must have completed and filed an enrolment card with the Industrial Carpenters' Benefit Plan.
3. You must have a minimum of 260 hours reported to the Plan by a contributing employer within a four month consecutive period.
4. In the event a Member has a lapse of coverage for a period of twelve (12) months or more the Member must re-enroll in the Plan and qualify as a new Member.

HAVING MET THE ABOVE REQUIREMENTS, WHEN DOES MY COVERAGE COMMENCE?

Your coverage will commence on the first of the month following the month in which sufficient hours have been reported and paid to the Plan. For example, if you worked 280

hours or more in the months of April through June, your employer should report them to the Plan during the months of May through July respectively, thereby allowing you to qualify August 1st.

WHAT DEPENDENTS CAN BE COVERED UNDER THE BENEFIT PLAN?

1. The person to whom you are legally married or who has lived with you as a spouse for at least 12 consecutive months.
2. Dependent Children include:
 - Any unmarried child under age 21 who is living with and is financially dependent on you or your spouse (19 years for MSP);
 - Any unmarried child who is living with and is financially dependent on you or your spouse if the unmarried child is also in full-time attendance (in accordance with the respective academic calendar) at a recognized educational institute;
 - any unmarried handicapped child of any age who is living with and financially dependent on you or your spouse and is incapable of self-sustaining employment.

HOW WILL I KNOW WHEN I HAVE QUALIFIED?

You will be advised by the Industrial Carpenters' Benefit Plan and a Care Card will be issued by the Medical Services Plan of BC (if you do not already have one) soon after sufficient hours are reported and your other qualifications are in order.

HOW DOES THE HOUR BANK WORK?

All hours worked for a participating employer which have been reported and paid for by the employer will be added to your Hour Bank. Each month while you are covered, 130 hours are withdrawn from your Hour Bank to maintain coverage. You can accumulate up to 780 hours (6 months of advance coverage) which can be used to maintain coverage during periods of unemployment, illness, etc.

HOW WILL I KNOW IF HOURS ARE REPORTED ON MY BEHALF?

Check with your Local Union or the Industrial Carpenters' Benefit Plan (ICBP) office at 1-877-411-2806.

WHAT HAPPENS IF MY HOUR BANK DROPS BELOW THE REQUIRED 130 HOURS IF I BECOME UNEMPLOYED?

If your Hour Bank drops below 130 hours at the end of any given month, you are mailed a notice of shortage of hours requesting payment to provide coverage for the following month. The notice should not be ignored, even if you have returned to work. Do not assume that since you have returned to work, hours will be reported to cover your shortage. Please bear in mind that hours worked during the current month are not

reported to the Plan until the following month, therefore these hours cannot be used for the month for which you have been billed.

THE ONLY SURE WAY TO GUARANTEE CONTINUOUS COVERAGE IS TO ENSURE PAYMENT OF THE SHORTAGE NOTICE IS RECEIVED BY THE PLAN ADMINISTRATION OFFICE BY THE 20TH OF THE MONTH.

DO NOT send cash in the mail. Make cheques or Money Orders payable to: **INDUSTRIAL CARPENTERS' BENEFIT PLAN**. You will receive two (2) Shortage Notices for Full coverage which will be changed to Mini coverage after that.

WHAT HAPPENS IF I MOVE FROM THE PROVINCE?

If you move to another Province or Territory, coverage may continue, providing you have sufficient hours.

HOW DO I ADD OR DELETE A DEPENDENT?

A "Group Change" form may be obtained from your Local Union or the Industrial Carpenters' Benefit Plan. This form must be completed and filed with the Plan Administration office before a change can be effective. Dependents must be registered within 30 days in order to have them covered. Please note that there is a strict one-year waiting period for adding a spouse.

WHAT SHOULD I DO IF I CHANGE MY ADDRESS?

Notify the Industrial Carpenters' Benefit Plan immediately as "Shortage of Hours" advice or any other material mailed by, or under authority of, the Industrial Carpenters' Benefit Plan to your last known address is deemed to have been duly received by you. Please ensure that all correspondence with the Plan includes your address and Local Union number.

ARE ANY OF THE BENEFITS TAXABLE?

Yes. Wage Indemnity, Medical Premiums and Life Insurance are all taxable when paid for by employer contributions. The Industrial Carpenters' Benefit Plan will issue a T4A which represents the amount paid on your behalf for Medical and Life Insurance Premiums. BC Life & Casualty will issue T4As for any Wage Indemnity Benefits paid to you during the calendar year. The T4As must be added to your personal Income Tax as income.

WHAT HAPPENS TO MY COVERAGE IF I RECEIVE AN HONOURARY WITHDRAWAL FROM THE UNION?

Coverage ends at the end of the month in which Withdrawal is taken.

UNDER WHAT CIRCUMSTANCES WILL MY COVERAGE TERMINATE?

Your coverage will terminate at the end of the month in which your Hour Bank balance was below 130 hours and you failed to pay your shortage notice. Please note that you can self-pay for a maximum of 18 months.

Your coverage will end also on the last day of the month in which you lose your Union membership.

If you allow your coverage to terminate, you must then requalify as a new Member by accumulating 260 hours.

TERMINATED MEMBER

Self Payment Cash Balance arising from self payments will be refunded upon termination of coverage.

ASSOCIATE MEMBERS

WHO IS ELIGIBLE FOR BENEFITS AS AN ASSOCIATE MEMBER?

1. Any employer who employs union Members for whom contributions are being made to the Plan.
2. Personnel of such employers.
3. Employees of a participating Local Union other than Members of the Union.

Note: A majority of office personnel of each employer must elect to participate as Associate Members in order to qualify. No person who has attained the age of 65 may join the Plan as an Associate Member.

HOW DOES AN ASSOCIATE MEMBER QUALIFY FOR BENEFITS?

Three months of payments must be received by the Plan Administration office. Also, Enrollment Forms must be completed and filed with the Plan Administration office.

WHEN DOES COVERAGE COMMENCE FOR AN ASSOCIATE MEMBER?

On the first of the month after the month in which three months of payments have been received by the Plan Administration office.

Note: Rates and rules applying to Associate Members may be reviewed periodically and altered, if necessary, depending on the experience of the Group, as well as benefits and services provided.

IF AN ASSOCIATE MEMBER CHANGES EMPLOYERS, WILL IT AFFECT HIS ELIGIBILITY?

Possibly. An Associate Member should contact the Plan Administration office if he changes employers.

HOW WILL AN ASSOCIATE MEMBER KNOW WHEN SUFFICIENT PAYMENTS HAVE BEEN REPORTED BY HIS EMPLOYER TO QUALIFY HIM?

A “New Member” letter will be sent to the employee which briefly outlines the benefits provided and the date coverage commences. A Pacific Blue Cross card will also be issued for Extended Health Care benefits listing all covered dependents, group number and coverage effective date.

WHEN WILL COVERAGE END FOR AN ASSOCIATE MEMBER?

Coverage for an Associate Member will end on the last day of the last month for which payment has been made.

UP TO WHAT AGE WILL I BE COVERED FOR WAGE INDEMNITY AND GROUP LIFE INSURANCE?

Your coverage will continue to age 70 or until retirement, whichever first occurs, providing proper payments have been received.

WAGE INDEMNITY (SHORT TERM DISABILITY) BENEFITS

WHO IS ELIGIBLE FOR WAGE INDEMNITY BENEFITS?

Industrial Union Members and Associate Members who are covered under the Industrial Carpenters’ Benefit Plan.

WHAT BENEFITS AM I ENTITLED TO?

For non-occupational disabilities, you are entitled to \$400 per week. Payments will be made for the first 4 weeks of disability, then you have to apply for the EI sickness benefit. EI will provide benefits from the 5th to the 19th week of disability. If you are still disabled, we will provide benefits for an additional 26 weeks.

The maximum amount of benefit is 30 weeks.

WHEN DO BENEFITS COMMENCE?

1. On the 1st day of disability due to non-occupational injury or accident.
2. On the 1st day of hospitalization as an in-patient due to non-occupational illness and non-occupational injury.

3. On the 5th day of disability due to non-occupational illness.

MUST I CONSULT A DOCTOR BEFORE I SUBMIT A WAGE INDEMNITY CLAIM?

Yes. You must be under the full-time care and treatment of a licensed physician or surgeon.

HOW DO I MAKE A CLAIM FOR WAGE INDEMNITY BENEFITS?

1. Obtain a claim form from your Local Union or the Industrial Carpenters' Benefit Plan.
2. After the claim form has been completed in full by you and your Doctor, return it to the Industrial Carpenters' Benefit Plan within 30 days of becoming disabled.

CAN I RECEIVE WAGE INDEMNITY IF TREATED BY A CHIROPRACTOR?

Yes. When the claim is signed by a Chiropractor, benefits will be paid for a maximum of 4 weeks for any one period during which time you are totally disabled.

CAN I RECEIVE WAGE INDEMNITY IF TREATED BY A DENTIST OR ORAL SURGEON?

Yes. Benefits will be paid for any one period during which time you are totally disabled.

IS THERE A TIME LIMIT ON FILING A WAGE INDEMNITY CLAIM?

Yes. Claims must be forwarded to the Industrial Carpenters' Benefit Plan within 30 days of becoming disabled, unless special circumstances prevent you from so doing. In this event, a written explanation as to the delay must accompany your claim.

ON WHAT BASIS ARE WAGE INDEMNITY BENEFITS PAID?

Benefits are paid on the basis of a 5 day working week, that is, Monday through Friday.

WHAT HAPPENS IF I HAVE OTHER WAGE INDEMNITY COVERAGE?

You may not draw more than 100% of your normal earnings in all benefits. In such an event, your benefits from this Plan would be reduced proportionately.

IS WAGE INDEMNITY PAYABLE DURING PERIODS OF UNEMPLOYMENT?

No. To be eligible for Wage Indemnity you must be working for a Participating Employer at the time of illness or accident.

If you become disabled while on layoff, strike or leave of absence, and premiums have continued to be paid, Wage Indemnity benefits are payable upon your scheduled return to

work date. Any waiting period prior to the commencement of benefits begins on your scheduled return to work date.

WOULD I BE ELIGIBLE FOR BENEFITS IF I HAD BEEN CALLED BACK TO WORK AND A DISABILITY PREVENTED MY RETURN?

Yes, providing your doctor supports the claim, you can provide proof of recall and you are not receiving EI benefits. You are allowed one maximum claim during any one twelve-month period. In order to qualify for further benefits after a maximum claim has been paid, you must have returned to work with a participating union employer for a MINIMUM of four consecutive weeks.

AT WHAT AGE DO I CEASE TO BE ELIGIBLE FOR WAGE INDEMNITY BENEFITS?

When you reach retirement or age 70, whichever first occurs, and employer contributions are no longer received on your behalf, you will no longer be eligible for Wage Indemnity Benefits.

AM I ENTITLED TO BENEFITS WHEN A THIRD PARTY IS INVOLVED?

Benefits will be paid for disabilities due to an accident in which a third party is liable only if you agree to reimburse the Plan when you receive payment from the third party. The proper undertaking will have to be signed by the Claimant.

WHAT ARE THE EXCLUSIONS FOR WHICH WAGE INDEMNITY BENEFITS ARE NOT PAYABLE?

1. Occupational accidents or illness. You are covered under the Workers' Compensation Act for occupational accidents or illness.
2. Self inflicted injury or illness, or attempted suicide, while sane or insane, except alcohol or drug addiction for which you are undergoing treatment in a recognized treatment facility.
3. Injury or illness resulting from war, participation in a riot or disorderly conduct, or arising while serving as a Member of any armed services.
4. Injury or illness sustained while committing a criminal offense.
5. No benefits will be paid for any period for which you have, or will have, received vacation pay.
6. No benefits will be paid for any period while you are on layoff, strike or leave of absence unless you continue to be on Full Coverage.

7. No benefits will be paid for any period you are confined in a penitentiary, prison, jail or mental institution pursuant to a court order.
8. If an accident or illness occurs prior to you becoming eligible, Wage Indemnity Benefits will not be paid to cover this particular disability, even though you become eligible during a period of disability.
9. If you are receiving any forms of pension from Canada Pension Disability.
10. You perform any work for compensation, unless approved by the insurer.
11. You fail to provide the insurer with satisfactory proof of the continuance of your disability, or you refuse to undergo a medical examination by an independent physician chosen by the insurer.
12. Disabilities prior to date of coverage.

WHAT HAPPENS IF I HAVE A RECURRENCE OF A FORMER AILMENT FOR WHICH I HAVE OBTAINED WAGE INDEMNITY BENEFITS?

If you have a relapse of the same or related disability after returning to full-time work at your normal occupation for less than four consecutive weeks, your Wage Indemnity benefits will resume where they left off.

You are allowed one maximum claim during any one twelve month period. In order to qualify for further benefits after a maximum claim has been paid, you must have returned to work with a participating Employer for a minimum of 4 consecutive weeks.

WHAT ARE DISABILITY CREDITS?

When you commence drawing Wage Indemnity Benefits, the Plan will supplement your Hour Bank to the extent of 6.5 hours per work-day to assist you in maintaining coverage. This supplement is referred to as Disability Credits. Any form of credits extended by the Plan can only be used for continuity of coverage. They cannot be used to establish eligibility.

IS THERE A PENALTY FOR ABUSE OF BENEFITS?

Yes. If you make a claim under false pretences, you may have your Wage Indemnity and eligibility for such suspended for a period of one year.

COVERAGE TERMINATION

Coverage will terminate at retirement or age 70, whichever first occurs.

EXTENDED HEALTH CARE PLAN

For details about the Extended Health Care Plan, please check their website (www.pbchbs.com), or call Pacific Blue Cross at 1-888-275-4672.

HOW TO MAKE A CLAIM

You have until June 30 to finalize claims for expenses incurred the previous year. Make copies of your receipts before sending them to Pacific Blue Cross as the originals will not be returned. When properly completed, return the Extended Health Care claim form, together with your receipts to:

PACIFIC BLUE CROSS
P.O. BOX 7000, Vancouver, B.C. V6B 4E1

DENTAL-OPTICAL-HEARING AID REIMBURSEMENT PROGRAM

**NOTE: THIS IS A REIMBURSEMENT PLAN;
WE DO NOT DEAL DIRECTLY WITH THE SERVICE PROVIDER**

SCHEDULE OF BENEFITS – effective January 1st, 2013.

1. Benefit entitlement year - January 1 to December 31.
2. Benefits are pro-rated for portion of year for new Members of the Industrial Carpenters' Benefit Plan as illustrated in the table below:

January 1 st	=	\$5,500.00	} Pro-rated maximum allowable
February 1 st	=	\$5,041.67	
March 1 st	=	\$4,583.34	
April 1 st	=	\$4,125.01	
May 1 st	=	\$3,666.66	
June 1 st	=	\$3,208.35	
July 1 st	=	\$2,750.02	
August 1 st	=	\$2,291.69	
September 1 st	=	\$1,833.36	
October 1 st	=	\$1,375.02	
November 1 st	=	\$916.68	
December 1 st	=	\$458.34	

3. Benefit entitlement maximum per family - 90% of \$5,500.00.
4. Optical Benefit - maximum of 90% of \$650 for Members and for each eligible dependent once every 24 months, or once in a 12 month consecutive period for children age 16 and under. Eye exams are covered on the same basis.

WHO IS COVERED BY THE PROGRAM?

Members and their eligible dependents.

WHAT DENTAL SERVICES ARE COVERED?

Unlike other prepaid Plans, the Program covers all normal dental services to the maximum allowed under the Program per calendar year. No pre-approval is required.

ARE THERE ANY LIMITATIONS?

Yes. Members and eligible dependents are each limited to one set of dentures (upper and/or lower) in a consecutive three year calendar period. Facility fees, generally charged by oral surgeons, are excluded.

Your Optical coverage excludes reimbursement for fitting fees, laser surgery, insurance/warranties, and non-prescription lenses (i.e. magnifiers).

DO I HAVE A CHOICE OF DENTIST?

Yes, you may choose your own dentist. You may also use any of the services of a Dental Mechanic if so desired.

IS THERE COVERAGE OUTSIDE BRITISH COLUMBIA?

Yes. Dental attention required while you are temporarily outside the Province will be covered and reimbursed at 90% of the cost up to the maximum allowed by the Program.

WHAT TAKES PLACE WHEN THERE IS A LAPSE OF COVERAGE WITH THE INDUSTRIAL CARPENTERS' BENEFIT PLAN?

If you are a newly qualified Member after January 1st of any year or have a break in coverage during the calendar year, the allowable maximum will be pro-rated i.e. If coverage commences June 1st the maximum allowable will be 7/12 of \$3,000 or 90% of \$1,750 for the remainder of the year. If your coverage terminated March 30th and you re-qualified again on July 1st, you would be entitled to 9/12 of \$3,000 or 90% of \$2,250.

WHO HAS THE CONTROL OVER SERVICE AND COST?

As you will be paying the provider directly for dental and optical services, you will be deciding how to make the best use of your dental dollar. Make sure that there is an understanding on charges and the work is satisfactory to you.

WHO CONTROLS AND OPERATES THE PROGRAMS?

The Industrial Carpenters' Benefit Plan Trustees control the Program and administration is a part of the overall operation. Any coverage disagreements may be appealed to the Trustees; their decision will be final.

AT WHAT AGE DOES DENTAL COVERAGE TERMINATE?

Dental coverage will terminate at retirement or age 70, whichever first occurs, as long as there are sufficient continuous employer-contributed hours in the hour bank to cover the monthly charge.

HOW DO I APPLY FOR REIMBURSEMENT?

Once you have received dental treatment and paid for the treatment in full, obtain a Dental/Optical Reimbursement claim form from your Local Union office or the Industrial Carpenters' Benefit Plan Administration office. Mail the completed form along with your official **paid** itemized statement to the Industrial Carpenters' Benefit Plan for reimbursement. Please ensure that you include proof of **your payment** for the items you are claiming.

The Industrial Carpenters' Benefit Plan is a reimbursement plan, not a pay direct plan, and therefore will not pay directly to your Dentist.

IS THERE A TIME LIMIT ON FILING A DENTAL-OPTICAL-HEARING AID CLAIM?

Yes, you have until June 30th to finalize claims for expenses incurred the previous year. This means that all claims for the previous year must be received by the Industrial Carpenters' Benefit Plan Administration office in Burnaby before June 30th. There will be no exceptions.

IS THERE A PENALTY FOR GIVING INCORRECT INFORMATION?

Yes. A person who submits a misleading claim or gives improper information will jeopardize his membership in the Industrial Carpenters' Benefit Plan.

ARE THERE ANY EXCLUSIONS UNDER THE PROGRAM?

Yes. The Plan will not be liable for claims for which provision is made under the Medical Services Act or for which a third party is liable of for which coverage is provided under the Extended Health Care Plan.

HEARING AID BENEFIT

WHAT BENEFITS ARE AVAILABLE UNDER THE HEARING AID PROGRAM?

The cost of Hearing Aids will be reimbursed at 90% of the allowable lifetime maximum of \$3,000.00 (effective January 1 2013) per eligible family member.

DOES THE AMOUNT CLAIMED UNDER THE HEARING AID PROGRAM AFFECT THE YEARLY MAXIMUM?

No. The amount claimed under the Hearing Aid Program has no effect on the yearly maximum of 90% of \$3,750 allowed under the Dental/Optical Program.

ARE REPAIRS AND BATTERIES COVERED?

Yes. Repairs and batteries are covered under the Program. The cost of these repairs are included in the \$3,000.00 lifetime maximum.

ARE THERE ANY EXCLUSIONS UNDER THE PROGRAM?

Yes. The Plan will not be liable for claims for which provision is made under the Medical Services Act, or for which a third party is liable or for which coverage is provided under the Extended Health Care Plan.

Other exclusions include ear plugs, hearing tests and any products covered by WCB.

HOW DO I APPLY FOR REIMBURSEMENT?

Obtain a Hearing Aid Reimbursement claim form from your Local Union office or the Industrial Carpenters' Benefit Plan office. Mail the completed form along with your official paid itemized statement to the Industrial Carpenters' Benefit Plan for reimbursement.

EMPLOYEE ASSISTANCE (counselling)

This benefit provides assistance to members with a wide variety of counseling services currently not available through MSP or other sources. A referral from your doctor is not required. The benefit is 90% of \$1,500 per family per calendar year effective January 1 2013.

GROUP LIFE AD&D INSURANCE

The Group Life AD&D Insurance is underwritten by BC Life & Casualty Company.

WHAT IS THE AMOUNT OF GROUP LIFE/AD&D INSURANCE?

\$50,000 of insurance is payable in the event of death from any cause while you are insured under the Group Policy, on Full coverage; \$25,000 for Members covered under the Mini Coverage.

IF I DIE, TO WHOM IS THE INSURANCE PAID?

The insurance will be paid to the beneficiary designated by you. You may change the beneficiary at any time.

If your beneficiary dies before you, or if you do not designate a beneficiary the insurance will be payable to your Estate.

“Designation of Beneficiary” or “Change of Beneficiary” cards are available from your Local Union or the Industrial Carpenters’ Benefit Plan. It is your responsibility to complete the beneficiary card and file it with the Plan.

HOW DOES MY BENEFICIARY APPLY FOR THE LIFE INSURANCE?

Your beneficiary must contact the Industrial Carpenters’ Benefit Plan to obtain the necessary claim forms. On completion of the forms by the claimant and the attending physician, they must be returned to the Industrial Carpenters’ Benefit Plan. Provided the forms are complete in every respect and eligibility is in order, the claim will be processed without delay.

WHAT BENEFIT DOES THE PLAN PROVIDE FOR LOSS OF LIMB OR SIGHT (AD&D)?

The Plan provides the following dismemberment benefits:

Both Hands or Both Feet	100%
Entire Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and Entire Sight of One Eye	100%
One Foot and Entire Sight of One Eye	100%
Speech and Hearing	100%
One Arm or One Leg	75%
One Hand or One Foot	66.6%
Entire Sight of One Eye	66.6%
Speech or Hearing	50%
Thumb and Index Finger of the Same Hand	33.3%
Four Fingers of the Same Hand	33.3%
Hearing in One Ear	16.6%
All Toes of the Same Foot	12.5%
Quadriplegia (complete paralysis of	100%

both upper and lower limbs)
Hemiplegia (complete paralysis of upper 100%
and lower limbs of one side of the body)

WHEN DOES MY GROUP LIFE INSURANCE TERMINATE?

Your Group Life Insurance will terminate on the last day of the month in which:

1. You attain the age of 70. Life Insurance will continue if you are over age 70 as long as you have sufficient employer-contributed hours to provide coverage.
2. Your coverage ceases under the hour bank regulation.
3. You cease to be covered as an Associate Member.

WHAT HAPPENS TO MY LIFE INSURANCE IF MY MEMBERSHIP TERMINATES?

The Life Insurance Benefit will terminate at the end of the month in which your coverage terminated with the Industrial Carpenters' Benefit Plan.

SPOUSE INSURANCE

WHAT PROTECTION DO I HAVE?

If your spouse dies prior to you attaining age 70, \$8,000 is payable to you.

DOES MY SPOUSE HAVE TO BE COVERED BY THE INDUSTRIAL CARPENTERS' BENEFIT PLAN?

Yes, the \$8,000 spouse's death benefit is only payable if the spouse is duly designated as a dependent and covered by the Industrial Carpenters' Benefit Plan at time of death.

IS THE SPOUSE INSURANCE PAYABLE TO AN ESTATE?

No, the \$8,000 spouse insurance is only payable to the Member.

HOW DO I MAKE A CLAIM?

Contact the Industrial Carpenters' Benefit Plan office. The application and claimant's statement will be sent to you. Once completed, return along with the death certificate to the Industrial Carpenters' Benefit Plan Office.

HOURLY BANK CREDITS

WHO IS ELIGIBLE FOR HOURLY BANK CREDITS?

Members who are receiving Wage Indemnity Benefits, Workers' Compensation and the Sickness Benefit from E.I. are eligible for credits.

HOW DOES THE BENEFIT AFFECT MY HOURLY BANK?

1. Members receiving Wage Indemnity Benefits will receive 6.5 hours per work day till benefits stop. The Plan will automatically grant credits.
2. Members receiving Workers' Compensation may receive hourly bank credits at the rate of 6.5 hours per day to a maximum of 80 days.
3. Members receiving Sickness Benefit from E.I. may receive hourly bank credits at the rate of 6.5 hours per day to a maximum of 75 days.

HOW DO I APPLY FOR THE BENEFIT?

Application forms are available at your Local Union office or at the Industrial Carpenters' Benefit Plan office. The form must be completed in full, signed and forwarded to the Industrial Carpenters' Benefit Plan of B.C. along with the Workers' Compensation cheque stubs, or cheque stubs from E.I. showing Sickness Benefits.

Any form of credits extended by the Plan can only be used for continuity of coverage. They cannot be used to establish eligibility.