

Ohio Police & Fire Pension Fund 140 East Town Street Columbus, OH 43215 Phone: 1-888-864-8363

www.op-f.org

EMPLOYER CERTIFICATION OF MEMBER ENROLLMENT

To be completed by an authorized employer representative

Ohio Revised Code 742.01 sets forth the eligibility requirements for individuals who are required to become a member of Ohio Police & Fire Pension Fund (OP&F). Before enrolling in OP&F, the employer should review the eligibility requirements and confirm that the individual meets these requirements for OP&F membership. If the individual meets the requirements, the employer must complete this form to begin the process of enrollment in OP&F. OP&F reserves the right to reject membership or service credit at a later date as information becomes available.

This form must be completed and submitted to OP&F no later than the last day of the month following the month wages are paid to the member.

Please include a copy of the appointment letter confirming full-time status for the member. In addition, for police officers, please submit one of the following: OPOTA Certificate, OPOTA Officer Record or SF400 (Notice of Peace Officer Appointment). For firefighters, please submit a copy of the certificate earned upon completion of the requisite firefighter training course.

This form must be completed and filed with OP&F for each new employee who is hired as a full-time police officer or fire-fighter in a position qualifying for enrollment in OP&F. This form must also be completed for employees who are rehired, reinstated, returning from lay-off, or re-employed retirees. For members who are reinstated by agreement or by order of a court or arbitrator, the employer must also submit a copy of the agreement or court order.

In addition to this form, Ohio law requires an employer to cause prospective members to undergo a physical examination in the form established by OP&F prior to his or her employment and, with limited exceptions, timely file the required documentation with OP&F. Otherwise, penalties and interest may be imposed against the employer. This Pre-Employment Physical (PEP) must be performed no later than the end of business on the employee's first day of full-time employment and no earlier than nine months prior to the employee's first day of full-time employment. A PEP may not be required for some returning or transferring members; however, the employer should contact OP&F to make this determination. OP&F's PEP requirements and forms are available at op-f.org/employers/employerforms.

Also, please note that employers are required to have employees hired in positions not covered by Social Security complete Social Security form SSA-1945 and submit a copy to OP&F.

Section A: Employee informatio	n							
Name: First, MI, Last, suffix (Jr. III, etc.)		☐ Police officer	Social Security number					
		Firefighter						
Section B: Employer information								
Employer:		Employer Code						
Street Address / Post office box								
City, State, ZIP code								
Employer phone	Fax	Email address						

		mining the employee's eligi at membership or service cr					
Employment Statu	s, check one	e of the following:					
☐ New full-tin	☐ New full-time ☐ Rehire		<u> </u>		nother OP&F-covered position		
Return from	n lay-off	☐ Re-employed retiree	Reinstated (atta	ach copy of court orc	ourt order or arbitration)		
OP&F Membership	Eligibility,	check one of the following:					
OP&F member includes any or Any person municipal of Section 12 • Any person is paid sole of Any person police deprocurse in the Course in Course	rship is required the following who receive corporation for the following the followin	ricer Ohio Revised Code ired for a full-time police offig: es an original appointment from a duly-established civil ointed pursuant to ORC Second for a full-time firefighter unicipal corporation, townslate satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 3303.07 or Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 10 for a full-time firefighter to satisfactorily complete, and Code Section 10 for a full-time firefighter to satisfactorily complete, and code Section 10 for a full-time firefighter to satisfactorily complete, and code Section 10 for a full-time firefighter to satisfactorily complete, and code Section 10 for a full-time firefighter to satisfactorily complete for a full-time	as a full-time regular pol service eligible list or pu ection 737.15 or 737.16 a municipal corporation; or fter September 16, 1998 in is required to satisfactor cate, OPOTA Officer Re- ction 742.01(B)(2) who is employed by a finip, joint fire district or other or to have satisfactorily con on 4765.55, or conducte	ice officer in a police irsuant to Ohio Revisus a full-time regular, as a full-time police orily complete a peace cord or SF400 (Note the political subdivisus completed, a firefight d under ORC Section	e department of a sed Code (ORC) police officer and e officer with a ce officer training tice of Peace e state, instrumention in a position in a position in ter training course on 3737.33.		
(month/day/year)	Date employee began or will begin working for pay as a full-time police officer or firefighter (use current start date). Please attach a copy of the appointment letter confirming full-time status for the member.						
(pay rate)	Member's initial hourly or yearly salary rate (please specify)						
(A, B, C or D)	Payroll reporting pick-up plan (A, B, C or D) that the member contributions will be submitted on the <i>Work History Report</i> .						
Pay frequency, (ch	eck one):						
☐ Weekly	☐ Bi-we	eekly (every two weeks)	☐ Semi-monthly (tw	ice per month)	☐ Monthly		
	he employee	fication named in Section A of this for all the statements made here					
Signature of authorized	employer repre	Date of signature					
Print name				Title			

Section C: Certification of membership eligibility