

**NEW YORK FIRE DEPARTMENT PENSION FUND SUBCHAPTER 2
9 METROTECH CENTER
BROOKLYN, NEW YORK 11201-3857 – ROOM #6W-02K**

I.T.H.P. WAIVER

(Check appropriate line)

_____ I hereby elect to contribute additional contributions to the New York Fire Department Pension Fund in accordance with the provisions of Section 13-326 (e) (7) of the Administrative Code by waiving the I.T.H.P. (Increased take Home Pay) reduction.

I understand that these pension contributions are covered by Section 414h of the IRS Code, and are Federally tax-deferred

_____ I hereby elect to reinstitute the I.T.H.P. waiver.

Signature: _____

Date: _____

Print Name: _____

SS# : _____

Unit: _____

Tax Registry # _____

FOR OFFICE USE ONLY

Payroll Effective Date: _____

_____ Applicant was processed for waiver of I.T.H.P.

_____ Applicant was processed for reinstatement of the I.T.H.P. waiver.