



Participant's User Guide
For

The Electronic Reciprocal Transfer System (ERTS™)

Allen Bates Technologies Inc.



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Introduction

Welcome to the Participant's User Guide for the new Electronic Reciprocal Transfer System (ERTS). This guide is organized in a step-by-step manner, so that participants/members can understand the Application and use it to properly manage their registration profile, file permanent and temporary cessations, and view both blanket authorizations and their registration information.

1. Getting Started

All participants/members of ERTS™ will need to have a valid personal email address to register initially at their Home Local Union Office or Fund Office for verification. (Note, email address share with other participants/members will not be accepted by the ERTS application)

This registration process will ensure that all participants register correctly and that access information will be emailed to them. Upon the completion of the verification and registration the participant/member will receive an account activation email to the email address provided during registration. After the participant activate their account, he/she will have access to the ERTS™ application, to manage their profile, by simply accessing the ERTS Website at <https://erts.ibew.com> with a supported browser such as Microsoft Edge™, Google Chrome™, or Firefox™. If the participant/member forgets their password, he/she can use the **Forgot Password?** link on the login page to reset their password.

As a participant/member of ERTS™, you will have the following rights that will be explained in detail throughout this document:

- View My Blanket Authorization
- View My Registration Profile
- Modify My Registration
- Temporary Cessation
- Permanent Cessation
- Help
- FAQ (Frequently Asked Questions)



2. ERTS Registration Process

All participants/members must be register on ERTS at their home Local Union or Fund Office or at a participating Local Union if traveling. The Plan participants/members will need to provide at least one type of photo identification and have or obtain an email address to complete the registration. This also will allow the participant/member to ask questions and to ensure all information is accurately entered into ERTS for their Blanket Authorization selections.

All the registration required fields will need to be completed with the information provided by the participant/member. A participant can, with the assistant of the home Local Union, select the correct Defined Benefit (DB), Defined Contribution (DC) and Health and Welfare (H&W) home fund designation by simply choosing the Local Union and signatory Fund. A participant/member should always select a home fund designation for all three (3) blanket authorization type (DB, DC, and H&W) in ERTS (figure 1). **If your home Local Union only has one Pension Fund, it is recommended that you select this fund for both your DB and DC designation.**

Registration

1 Enter Participant Information 2 Confirm Participant Information 3 Accept Fund Terms 4 Registration Complete

Participant Information
Required Information*

Country of Citizenship *
USA

First Name *
[Text Field]

Address Line 1 *
[Text Field]

City *
[Text Field]

Zip/Postal Code *
[Text Field]

Date of Birth *
Select date

Fax
[Text Field]

IBEW Local Union Number
[Dropdown]

Date of Birth *
Select date

Fax
[Text Field]

IBEW Local Union Number
[Dropdown]

Social Security Number *
[Text Field]

Last Name *
[Text Field]

Address Line 2
[Text Field]

State/Province *
[Dropdown]

Email *
[Text Field]

Phone Number *
[Text Field]

IBEW Card Number
[Text Field]

Phone Number *
[Text Field]

IBEW Card Number
[Text Field]

List of Home Fund Designations *
List of Home Fund Designations *

Home Defined Benefit (DB) Pension Fund *
[Dropdown] [Text Field]

Home Defined Contribution (DC) Pension Fund *
[Dropdown] [Text Field]

Home Health & Welfare Fund *
[Dropdown] [Text Field]

Clear Form Next

Figure 1 - Registration Page

Complete the entire form by entering the required information. A star (*) identifies required fields.

Select the Country of Citizenship and change to Canadian for Canadian plan participant/member's registration and enter the Canadian participant's SSN *and/or* SIN, **this is only applicable for Canadian participants/members so the ERTS application can accept Canadian Social Insurance Numbers (SIN)**. Enter all required fields including the participant valid email address. Scroll down to complete the participant Home Fund selection.

Be sure to select the Home Defined Benefit (DB) Pension Fund, Home Defined Contribution (DC) Pension Fund, and Health & Welfare Fund from the selection box. Note these fields will provide a list of Funds if more than one is signatory to the Local Union selected and click **Next** to continue the registration process.

*******For Local Union with only one (1) signatory Pension Fund, select this fund for the both the Defined Benefit (DB) and Defined Contribution (DC) Pension Fund (figure 2).

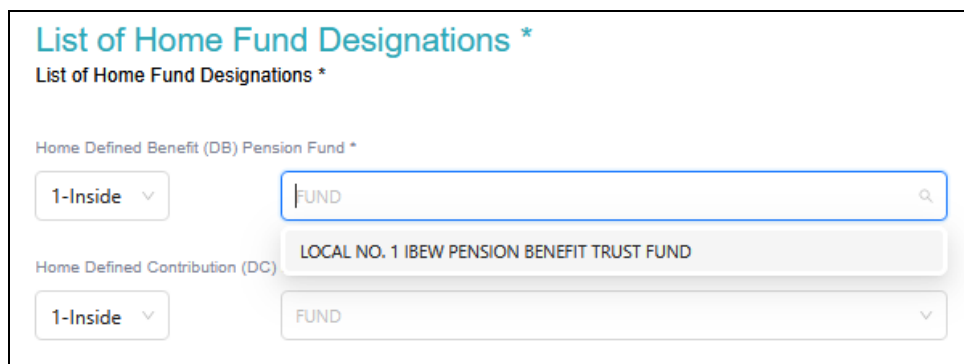


Figure 2 – Participant Registration Home Fund Selection

On the next page, communicate and click the **Check-box** for the Defined Benefit Fund, Defined Contribution Fund, and Health & Welfare Fund terms and agreements to the member/plan participant for acceptance and authorization to receive contributions on my behalf for hours worked within the area covered by any such Participating Fund(s) to transfer such hours and an equivalent amount of money to their properly-designated home and click **Next** to continue the registration process (figure 3).

Registration

1 Enter Participant Information 2 Confirm Participant Information 3 Accept Fund Terms 4 Registration Complete

Defined Benefit/Defined Contribution Pension Fund Terms

I hereby authorize all Defined Benefit (DB) or Defined Contribution (DC) pension funds ("Participating Funds") signatory to the Electrical Industry Pension Reciprocal Agreement ("Agreement") that receive contributions on my behalf for hours worked within the area covered by any such Participating Fund(s) to transfer such hours and an equivalent amount of money to my properly-designated home DB and/or DC pension fund ("Home DB/DC Fund"). I also authorize my properly-designated Home DB/DC Fund to accept and apply these transferred hours and monies pursuant to the Agreement and the Home DB/DC Fund's rules and internal administrative policies. For hours and monies transferred pursuant to this authorization I waive any claim on my behalf for benefits from a Participating Fund and release the Participating Fund(s) and its (their) trustees from any and all liability.

I Accept

H&W Fund Terms

I hereby authorize all Health & Welfare (H&W) funds ("Participating Funds") signatory to the Electrical Industry Health & Welfare Reciprocal Agreement ("Agreement") to receive all contributions for my hours worked within the area covered by any such fund(s) and to transfer such hours to my properly-designated home health & welfare fund ("Home H&W Fund"). I also authorize my properly-designated Home H&W Fund to accept and apply these transferred hours and monies pursuant to the Agreement and the Home H&W Fund's rules and internal administrative policies. I agree to have my eligibility and benefits determined by the rules of my Home H&W fund and that my Home H&W Fund may also require that I pay any difference in contribution rates in order to maintain coverage. I further understand and agree that I will receive the lesser amount of: 1) the contribution rate in the current Collective Bargaining Agreement ("CBA") in effect in the jurisdiction of my Home H&W Fund or 2) the contribution amount provided in the CBA in effect in the jurisdiction of the Participating Fund. For hours and monies transferred pursuant to this authorization I waive any claim on my behalf for benefits from a Participating Fund and release the Participating Fund(s) and its (their) trustees from any and all liability.

I Accept

Terms Applicable To All Funds

The effective date of this Authorization and Release shall be the first day of the month in which my Home Fund selection has been accepted. This Authorization and Release shall continue in full force and effect unless and until the last day of the month in which I subsequently effectuate a temporary cessation or a permanent cessation in accordance with the ERTS Agreement. I give my express consent to the IBEWNECA Electronic Reciprocal Transfer System(ERTS) to disseminate my personal information as necessary to effectuate this Authorization and Release, including but not limited to my name, address, Social Security or Social Insurance Number, and information submitted with reciprocal transfers pursuant to the Reciprocal Agreement.

I Accept

Figure 3 – Funds Terms and Agreements

Upon the completion of the registration process, the Local Union or Fund representative click the **Printing Required** button at the bottom of the page to **Export** the Participant Authorization & Release page for the plan participant/member to sign and date this page as confirmation to the information provided (Figure 4).

List of Home Fund Designations *

List of Home Fund Designations *

Home Defined Benefit (DB) Pension Fund *

1-Inside LOCAL NO. 1 IBEW PENSION BENEFIT TRUST FUND

Home Defined Contribution (DC) Pension Fund *

1-Inside LOCAL NO. 1 IBEW PENSION BENEFIT TRUST FUND

Home Health & Welfare Fund *

1-Inside IBEW LOCAL 1 HEALTH AND WELFARE FUND

Printing Required

Figure 4 – Printing Registration Page

Immediately upon completion of the registration process an account activation email will still be sent to the participant/member registered email address. At any time the participant/member can login to the ERTS application and maintain their information.

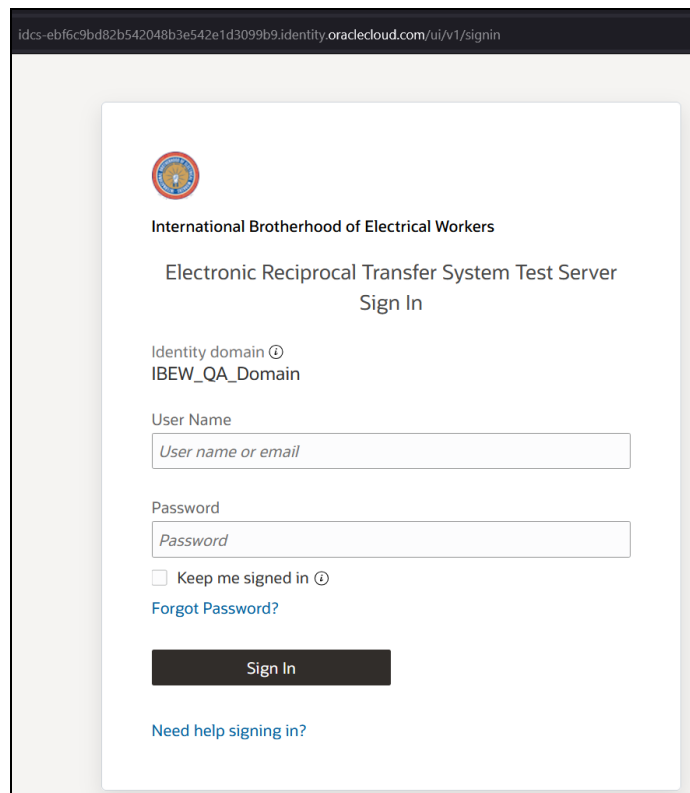


NOTE: Blanket authorizations are not created on ERTS™ until the specific home fund identified by the participant during registration accepts/approve the participant designation for reciprocity. The participant will be notified via e-mail if they were accepted or rejected by the fund. If rejected, the participant/member will need to login to ERTS™ and select a new fund.


3. Main Log-in Page

Enter the IBEW ERTS™ URL <https://erts.ibew.com> in your Web browser to get to the ERTS™ application. You will be immediately routed to the third party Identity Access Management (IAM) authentication application that is provided by Oracle Cloud Identity Services (IDCS) at https://idcs-*****.identity.oraclecloud.com/ui/v1/signin.

The main Login/Authentication page will be displayed (figure 5). Enter your User Name (this can be your Email address) and password and click **Sign In**. An authorization code is sent to your email address to use to complete the second (2nd) step of the authentication process. Accounts will be locked after three (3) failed attempts but you can use the **Forgot Password?** link on the Login/Authentication page to reset your password if you forgot your password.



idcs-ebf6c9bd82b542048b3e542e1d3099b9.identity.oraclecloud.com/ui/v1/signin



International Brotherhood of Electrical Workers

Electronic Reciprocal Transfer System Test Server
Sign In

Identity domain ⓘ
IBEW_QA_Domain

User Name

Password

Keep me signed in ⓘ

[Forgot Password?](#)

[Need help signing in?](#)

Figure 5 – Main Login Page



Completing the authentication process with the code sent to your email address will then provide you access to the ERTS™ application **Blanket Authorization and Release & Binding Electronic Signature** page for participants/members. This provides an explanation of the participant/member's authorization to fund offices to transfer benefits contributions to the designated home fund(s).

The participant/member can **only** get to the IBEW ERTS™ main screens after they agree to and accept the **Blanket Authorization and Release & Binding Electronic Signature** statement for the use of the system (the electronic signature process) and click on **Accept** (figure 6).

The screenshot shows a web page with a teal header bar containing the title "Blanket Authorization and Release & Binding Electronic Signature". Below the header is a white text area with a paragraph of legal text. At the bottom of the page are two buttons: a dark blue "Reject" button and a teal "Accept" button.

Blanket Authorization and Release & Binding Electronic Signature

I acknowledge and accept that I am a plan participant in a Pension and/or H&W fund(s) that is signatory to the Electrical Industry Pension Reciprocal and/ or Electrical Industry Health & Welfare Reciprocal Agreements. I understand that, by utilizing the IBEW / NECA Electronic Reciprocal Transfer System(ERTS), I am placing on file with ERTS a blanket and ongoing Authorization and Release(s), which authorizes the reciprocal transfer of any and all eligible contributions made on my behalf in accordance with the respective ERTS Agreements. I agree to the terms contained in the Authorization and Release(s) forms and acknowledge that my electronic signature on ERTS is legally binding. I acknowledge that this blanket Authorization and Release(s) will remain in effect until cancelled by me pursuant to the terms of the Reciprocal Agreement(s). (must click "accept" to proceed)

Reject Accept

Figure 6 – Electronic Signature Agreement Page


The participant/member main page will then be displayed (figure 7) to perform the available task within the ERTS™ system. Language on the page explains the terms and usage of the ERTS™ application.

ERTS SYSTEM
Electronic Reciprocal Transfer System


English | John

- Home
- Modify My Registration
- Permanent Cessation
- Temporary Cessation
- View My Blanket Authorizations
- View My Registration Profile
- Help & FAQ

☆ Group 1 Designations



Welcome to ERTS



Welcome to the IBEW Electronic Reciprocal Transfer System (ERTS). This system has been designed to assist plan participants in requesting the transfer of pension and health & welfare contributions back to their home funds regardless of work location. ERTS improves efficiency for plan participants, fund offices, and assisting local Unions by coordinating a timely and accurate transfer of information.

Participating Funds must first enroll by signing a separate contract with an ERTS service provider. Each fund employee must sign an agreement to preserve the confidentiality of participant information (Confidentiality of Employee Information). Local Unions (LU's) will be able to log into ERTS after each LU representative has signed a Confidentiality of Employee Information agreement. Funds and LUs will be issued a user ID and password by the Reciprocal Administrator once they have met the above requirements.

Individual participants (traveling employees) must initially register for an ERTS account in person with photo identification at an assisting LU or Fund Office. Once they have completed their initial registration, participants will receive their user ID and password in the mail at the address provided when they registered with ERTS.

Figure 7 – Participant/Member Main Page

The menu on the left side of the screen highlights the capabilities and features for the participant/member. The following sections outline these capabilities:

4. Modify My Registration Profile

A participant will be able to modify their registration profile. Once the participant accepts the terms, he/she will be able to modify certain registration information (Figure 8). This functionality must be used to modify home fund designation. **Any modification to Home Fund designation is subject to fund approval.**

Participant Information
Required Information*

<p>First Name *</p> <input type="text" value="John"/>	<p>Last Name *</p> <input type="text" value="Doe3"/>
<p>Phone Number *</p> <input type="text" value="512-758-5943"/>	<p>Fax</p> <input type="text"/>
<p>Address Line 1 *</p> <input type="text" value="1 Main Ave"/>	<p>Address Line 2</p> <input type="text" value="202"/>
<p>City *</p> <input type="text" value="Pittsburgh"/>	<p>State/Province *</p> <input type="text" value="Pennsylvania"/>
<p>Zip/Postal Code *</p> <input type="text" value="15306"/>	<p>Social Security Number *</p> <input type="text" value="388-53-0835"/>
<p>Date of Birth *</p> <input type="text" value="01/10/2000"/>	<p>Email *</p> <input type="text" value="erts+jdoe3@allenbates.com"/>
<p>IBEW Card Number</p> <input type="text" value="D1000000000"/>	<p>Home Local Union *</p> <input type="text" value="5-1"/>

Figure 11

Enter changes and click the **Save Changes** button to complete your changes. The page will remain open in case you need to make additional changes. Click the **Cancel** button when done with all changes.

5. View My Blanket Authorization

The participant can view the blanket authorizations that have been approved by the selected Home Funds after the Funds have approved his/her blanket authorization. There can be as many as three (3) separate blanket authorizations tiles on this page, one (1) for Defined Benefits (DB), Defined Contribution (DC) and Health and Welfare (H&W) (figure 8).

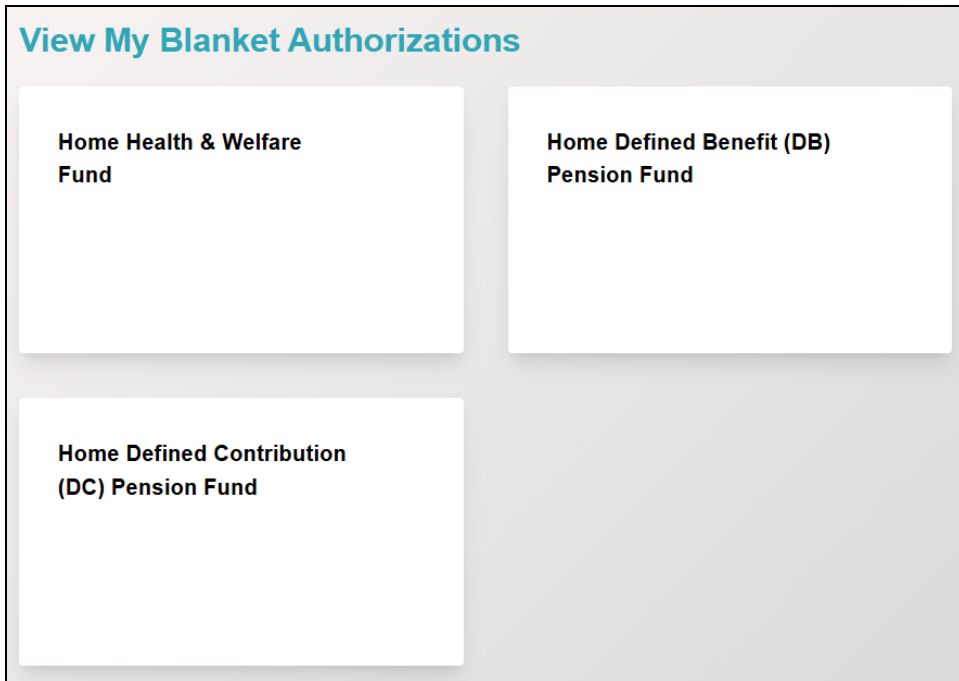


Figure 8

While the Blanket Authorization is pending approval the member’s blanket authorization will display a warning icon to indicate the pending approval status. If for example, the participant did not designate a H&W home fund or the selection was not approved by the selected fund, then there will **NOT** be a H&W authorization tile shown page (figure 9).

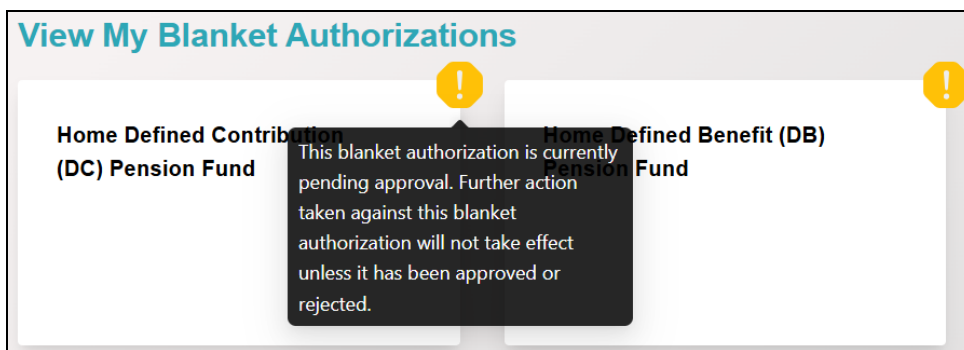


Figure 9 – Blanket Authorization Pending Approval



The participant can view the complete blanket authorization by clicking on the tile to open the form (figure 10).

Defined Benefit

All Funds Signatory to the Pension Reciprocal Agreement ^

In order to receive pension related credits in my home Defined Benefit pension fund (home DB fund) while working outside its jurisdiction, I hereby authorize all pension funds signatory to the Electrical Industry Pension Reciprocal Agreement to receive all contributions for my hours worked within the area covered by any such fund(s) and to transfer such hours and an equivalent amount of money to my home DB fund. I also authorize my home DB fund to accept and apply these transferred hours and monies pursuant to its rules, including any rules which take into consideration any difference in contribution rates between the transferring fund(s) and home DB fund.

For hours and monies transferred pursuant to this authorization, I hereby waive any claim on my behalf or on behalf of anyone making a claim through me to any benefits from any transferring pension fund(s) and release the fund(s) and its (their) trustees from any and all liability.

I also hereby give my express consent to the dissemination of information concerning me via the IBEW/NECA Electronic Reciprocal Transfer System (ERTS), including but not limited to name, address, Social Security or Social Insurance Number, and information submitted with reciprocal transfers pursuant to the Reciprocal Agreement (but not including my Employee's ERTS related personal identification number), to, but only to, authorized users of ERTS.

The effective date of this Authorization and Release shall be the first day of the month in which I have registered on ERTS, signed an Employee Confirmation form and designated a home DB fund (if the Home Fund later accepts the designation).

This Authorization and Release is voluntarily given by me and at my instance and shall remain in full force and effect until the last day of the month in which I subsequently may choose pursuant to the terms of the Reciprocal Agreement to affirmatively effectuate a temporary cessation (that is, a cessation that lasts as long as I am working in the area of the specific fund(s) where I am working when I file the temporary cessation) or a permanent cessation (that is, a cessation that stops reciprocal transfers of reciprocal monies permanently to any fund(s)).

Absent such an affirmative step by me, the 'blanket' nature of this Authorization and Release shall continue (that is, it will cover all instances where I am working outside of my home DB fund's jurisdiction in the jurisdiction of any other signatory fund).

***Your home fund(s) is a pension fund signatory to this reciprocal agreement which is:**
 A. The pension fund(s) covering the IBEW Local Union to which you belong if you are a participant or have credited service in the fund(s)
 B. Or if (A) is not applicable, the pension fund(s) in which you are currently a participant or have credited service.

NOTE: If you have no home fund or if you are a participant or have credited service in the pension fund(s) covering the IBEW Local Union to which you belong and that fund(s) does not participate in the reciprocity agreement, you cannot have funds transferred pursuant to this reciprocal agreement.

Personal Information

Name	Address	SSN
John Doe5	14 Main St Any City, PA 15305	468-37-7590
Phone Number	Date of Birth	Email
215-477-8239	09/09/1981	erts+jdoe5@allenbates.com

Fund Information

Home Local Union Code	Home Local Union	IBEW Card Number
332	24-I	A4785983902
Home Fund Code	Home Fund Name	Home Fund Location
9	MARYLAND ELECTRICAL INDUSTRY PENSION FUND	Ona, West Virginia
Registration Date	Approval Date	
09/03/2025	PENDING APPROVAL	

Figure 10 – Complete Blanket Authorization

An email notification will be sent to the participant upon the approval or rejection of the home fund selection. Once, approve by the selected home fund, the blanket authorization will display the approval date.

6. View My Registration Profile

Clicking on **View My Registration Profile** menu option will allow a participant to view the demographic information entered when they were either registered on ERTS™ or modified their profile. The information cannot be updated on this page that is designed to display a full summary of the entire member’s blanket authorizations information (figure 11).

My Registration Profile

Participant Information

<p>First Name *</p> <input type="text" value="John"/>	<p>Last Name *</p> <input type="text" value="Doe5"/>
<p>Phone Number *</p> <input type="text" value="215-477-8230"/>	<p>Fax</p> <input type="text"/>
<p>Address Line 1 *</p> <input type="text" value="14 Main St"/>	<p>Address Line 2</p> <input type="text"/>
<p>City *</p> <input type="text" value="Any City"/>	<p>State/Province *</p> <input type="text" value="Pennsylvania"/>
<p>Zip/Postal Code *</p> <input type="text" value="15305"/>	<p>Social Security Number *</p> <input type="text" value="488-37-7590"/>
<p>Date of Birth *</p> <input type="text" value="09/09/1981"/>	<p>Email *</p> <input type="text" value="erts+jdoe5@allenbates.com"/>
<p>IBEW Card Number</p> <input type="text" value="A4785983902"/>	<p>Home Local Union *</p> <input type="text" value="26A-B"/>

Local Union Fund Selection

Select the fund(s) you wish to make changes to by using the checkbox to the right of the fund(s) you want to edit. When you're ready to proceed click on the 'Edit Fund Selection' button to continue.



<p>DB Fund Local Union</p> <input type="text" value="24-I"/>	<p>Home Defined Benefit (DB) Pension Fund</p> <input type="text" value="MARYLAND ELECTRICAL INDUSTRY PENSION FUND"/>	<input type="checkbox"/> 
<p>DC Fund Local Union</p> <input type="text" value="5-I"/>	<p>Home Defined Contribution (DC) Pension Fund</p> <input type="text" value="WESTERN PENNSYLVANIA ELECTRICAL EMPLOYEES DEFERRED COMPEN"/>	<input type="checkbox"/> 
<p>H&W Fund Local Union</p> <input type="text"/>	<p>Home Health & Welfare Fund</p> <input type="text"/>	<input type="checkbox"/>

Figure 11 – View My Registration Profile

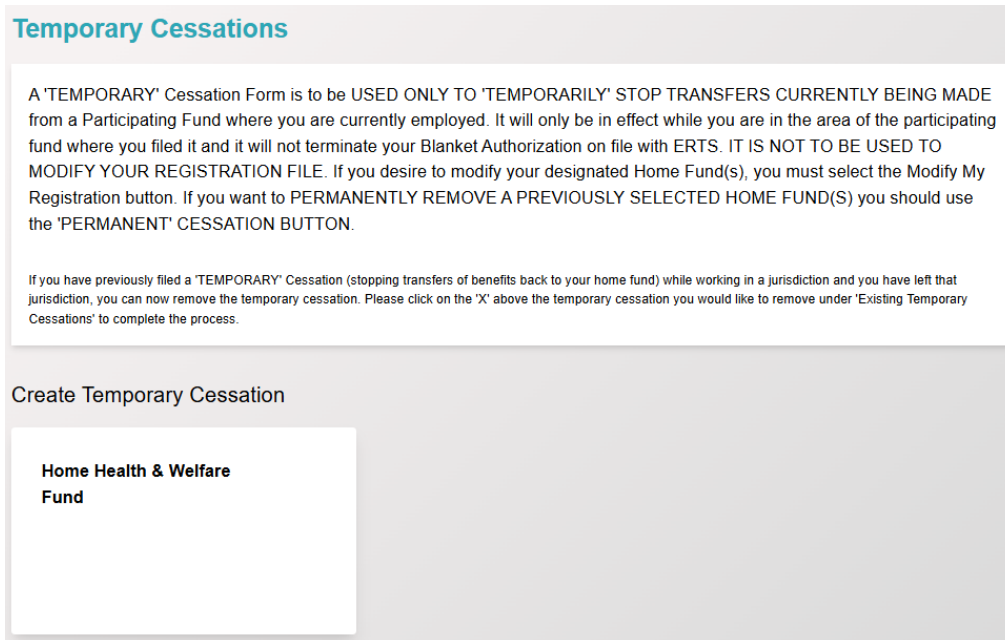
*****Note in this example that there is no home fund designated for H&W as it was either not selected during registration or rejected by the selected home fund.**

7. Cessations

7.1 Temporary Cessations

A participant can file only one temporary cessation at a time per fund. The temporary cessation can be removed by the member at any time and must do so to file a new temporary cessation. A temporary cessation will notify the work local union, the work fund and the participant's home local union and home fund of this action.

A participant is able to file a temporary cessation by clicking on the **Temporary Cessation** menu selection. Clicking on this button will display the temporary cessation explanation and warning page along with blanket authorization tile(s) of approved fund(s) for selection (figure 12).



The screenshot shows a web interface titled "Temporary Cessations". It contains a large text block explaining the purpose of the form: "A 'TEMPORARY' Cessation Form is to be USED ONLY TO 'TEMPORARILY' STOP TRANSFERS CURRENTLY BEING MADE from a Participating Fund where you are currently employed. It will only be in effect while you are in the area of the participating fund where you filed it and it will not terminate your Blanket Authorization on file with ERTS. IT IS NOT TO BE USED TO MODIFY YOUR REGISTRATION FILE. If you desire to modify your designated Home Fund(s), you must select the Modify My Registration button. If you want to PERMANENTLY REMOVE A PREVIOUSLY SELECTED HOME FUND(S) you should use the 'PERMANENT' CESSATION BUTTON." Below this is a smaller text block: "If you have previously filed a 'TEMPORARY' Cessation (stopping transfers of benefits back to your home fund) while working in a jurisdiction and you have left that jurisdiction, you can now remove the temporary cessation. Please click on the 'X' above the temporary cessation you would like to remove under 'Existing Temporary Cessations' to complete the process." At the bottom, there is a section titled "Create Temporary Cessation" which contains a single white tile with the text "Home Health & Welfare Fund".

Figure 12 – Temporary Cessation Fund Listing

The participant will need to click the tile for the fund to begin the process to submit a temporary cessation in ERTS™. ***The participant is required to select the work Local Union and work Fund to complete the temporary cessation (figure 13). The work Local Union and work Fund are sent notification to stop transfer of benefits contribution when the temporary cessation is submitted.

Health and Welfare Temporary Cessation Form

Personal Information

Name	Address	SSN
John Doe5	14 Main St Any City, PA 15305	468-37-7590

Local Union Information

Home Local Union	IBEW Card Number
26-I	A4785983902

Home Fund Name	Home Fund Location
ELECTRICAL WELFARE TRUST FUND - LOCAL 26	Lanham, Maryland

Temporary Cessation Information ?

Select Working in Local Union/Fund*

347-Inside	IBEW LOCAL UNION 347 HEALTH AND WELFARE FUND v
------------	---

Email*

erts+jdoe5@allenbates.com

Cancel

Next

Figure 13 – Temporary Cessation Work LU & Fund Selection

Click the **Next** button to obtain the temporary cessation confirmation and acceptance window where the participant must select the **Agree** button as electronic signature to complete the submission of the temporary cessation. The participant can print this confirmation page as documentation of the change before clicking **Finish** to complete the submission of the temporary cessation (figure 14).

Cessation of Transfers x

H&W

I understand that by processing this form that I am giving notice that I desire a 'temporary' cessation of transfers of my Health & Welfare contributions from your Participating Fund to my Home Fund. I realize that by requesting this 'temporary' cessation of the transfer of monies, I shall not be eligible to select a new Home Fund and have money transferred pursuant to Health & Welfare Reciprocal Agreement so long as I work in the area of the Participating Fund to which I have requested a cessation of the transfer of Monies. This notice shall become effective to stop transfers of Funds on the last day of the month this notice is signed and delivered to the Participating Trust Fund administrative office.



I Accept I Don't Accept

Close

Finish

Print

Figure 14 – Temporary Cessation Confirmation and Signature Window

The temporary cessation page will now display the status on the blanket authorization with an  symbol labeled “**Existing Temporary Cessations**” that allows the participant to remove the existing temporary cessation whenever he/she chooses to do so. Click on the  to get the pop-up warning page to remove the temporary cessation. Click the **Remove** button to complete the removal of the temporary cessation (figure 15).

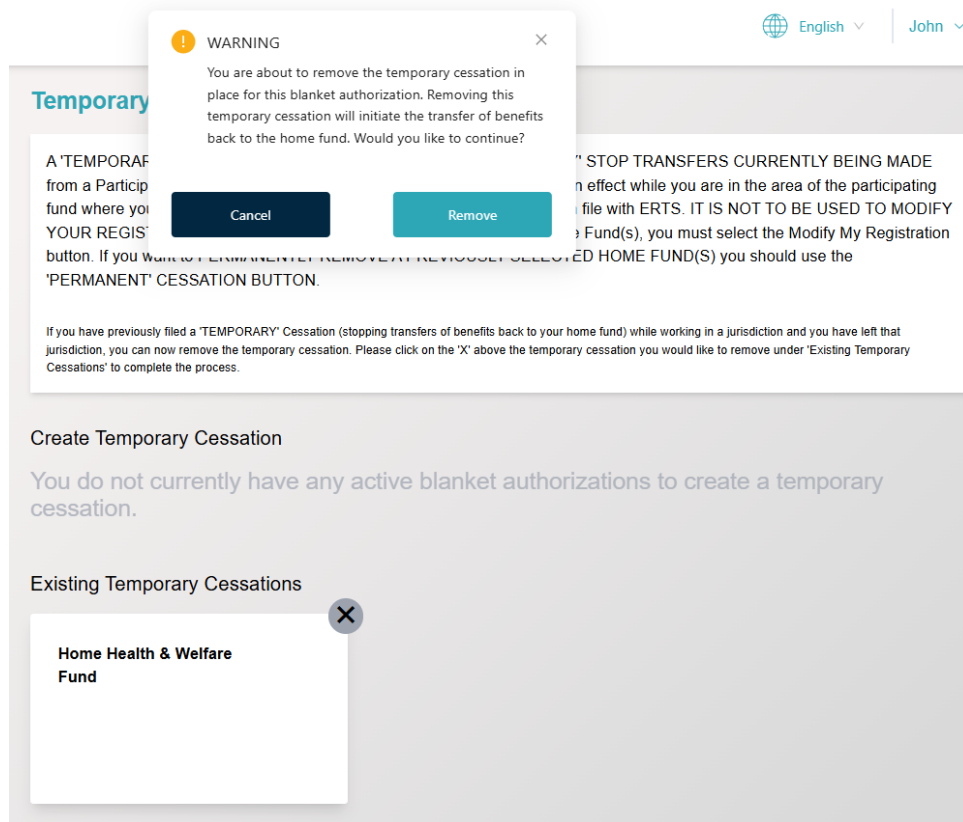


Figure 15 – Temporary Cessation Removal

7.2 Permanent Cessations

A permanent cessation removes a participant approved blanket authorization. Participants should take caution when executing a permanent cessation as this will completely stop benefits transfers back to their home fund. A permanent cessation will notify the work local union, the work fund and the participant's home local union and home fund of this action.

*****The permanent cessation workflow is used by participant to change their home fund designation as they will need to first remove the current home fund before selecting a new home fund.**

A participant is able to file a permanent cessation by clicking on the **Permanent Cessation** menu selection. Clicking on this button will display the permanent cessation explanation page. Click the **Click Here** link to navigate to the **Modify My Registration** page to continue the permanent cessation process flow (figure 16).

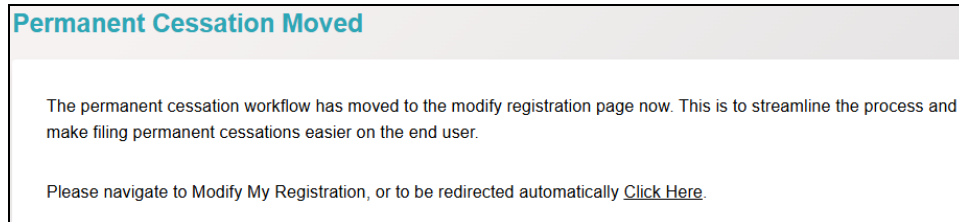


Figure 16 – Permanent Cessation Explanation and Warning

The **Modify My registration** page will be displayed with participant profile information at the top of the page and blanket authorization funds at the bottom of the page. Scroll to the bottom of the page to continue with the selection of the fund or funds to perform a permanent cessation (figure 17)

Participant Information

Required Information*

<p>First Name * <input type="text" value="John"/></p> <p>Phone Number * <input type="text" value="215-477-8239"/></p> <p>Address Line 1 * <input type="text" value="14 Main St"/></p> <p>City * <input type="text" value="Any City"/></p> <p>Zip/Postal Code * <input type="text" value="15305"/></p> <p>Date of Birth * <input type="text" value="09/09/1981"/></p> <p>IBEW Card Number <input type="text" value="A4785983902"/></p>	<p>Last Name * <input type="text" value="Doe5"/></p> <p>Fax <input type="text"/></p> <p>Address Line 2 <input type="text"/></p> <p>State/Province * <input type="text" value="Pennsylvania"/></p> <p>Social Security Number * <input type="text" value="468-37-7590"/></p> <p>Email * <input type="text" value="erts+jdoe5@allenbates.com"/></p> <p>Home Local Union * <input type="text" value="26A-B"/></p>
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Local Union Fund Selection

Select the fund(s) you wish to make changes to by using the checkbox to the right of the fund(s) you want to edit. When you're ready to proceed click on the 'Edit Fund Selection' button to continue.

<p>DB Fund Local Union</p> <p><input type="text" value="24-I"/></p>	<p>Home Defined Benefit (DB) Pension Fund</p> <p><input type="text" value="MARYLAND ELECTRICAL INDUSTRY PENSION FUND"/></p>	<p><input type="checkbox"/></p> <p></p>
<p>DC Fund Local Union</p> <p><input type="text" value="5-I"/></p>	<p>Home Defined Contribution (DC) Pension Fund</p> <p><input type="text" value="WESTERN PENNSYLVANIA ELECTRICAL EMPLOYEES DEFERRED COMPEN"/></p>	<p><input type="checkbox"/></p> <p></p>
<p>H&W Fund Local Union</p> <p><input type="text" value="26-I"/></p>	<p>Home Health & Welfare Fund</p> <p><input type="text" value="ELECTRICAL WELFARE TRUST FUND - LOCAL 26"/></p>	<p><input checked="" type="checkbox"/></p>

Figure 17 – Modify My Registration Page

The participant will need to click the checkbox next to the fund or funds they would like to perform the permanent cessation. After selecting the fund(s) then click on the **Edit Fund Selection** button to obtain the permanent cessation notice and warning page that provides clarification on the results of the permanent cessation (figure 18).

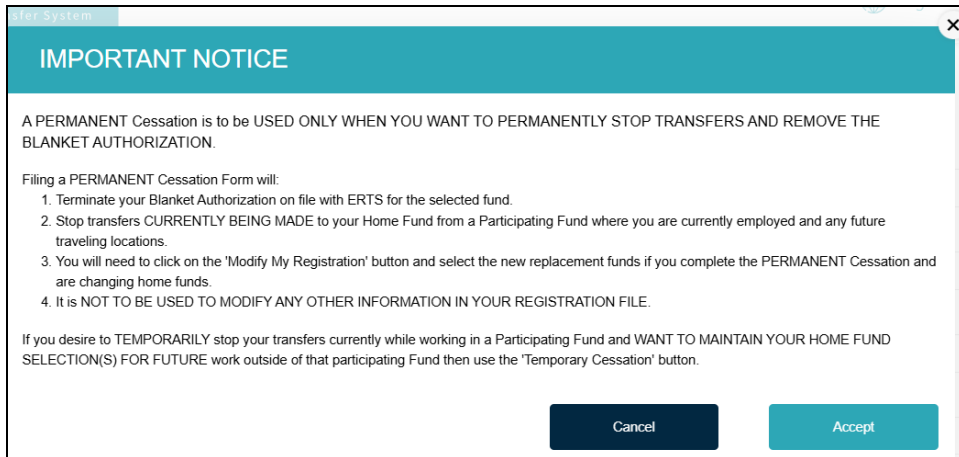


Figure 18 – Permanent Cessation Notice

Participant must click the **Accept** button to continue or click **Cancel** to stop the processing of the permanent cessation. Clicking the **Accept** button will move the participant into the workflow to select the jurisdiction where they are working Local Union and signatory Fund. *******The participant is required to select the work Local Union and work Fund to complete the permanent cessation (figure 19). The work Local Union and work Fund are sent notification to stop transfer of benefits contribution when the permanent cessation is submitted.

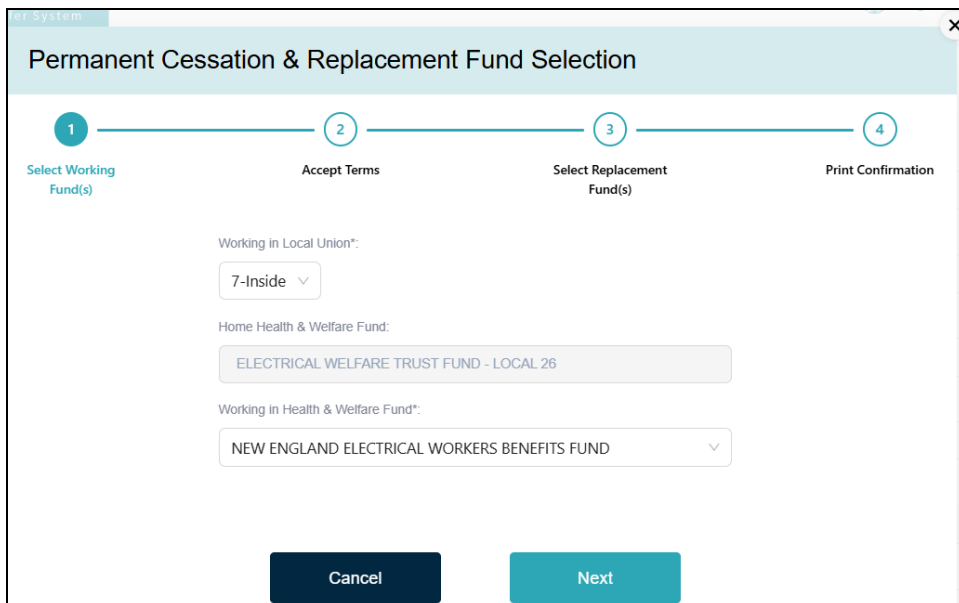


Figure 19 – Work Local and Fund Designation for Notification

Click **Next** to continue to the Terms and Agreement page to complete the electronic signature process (figure 20).

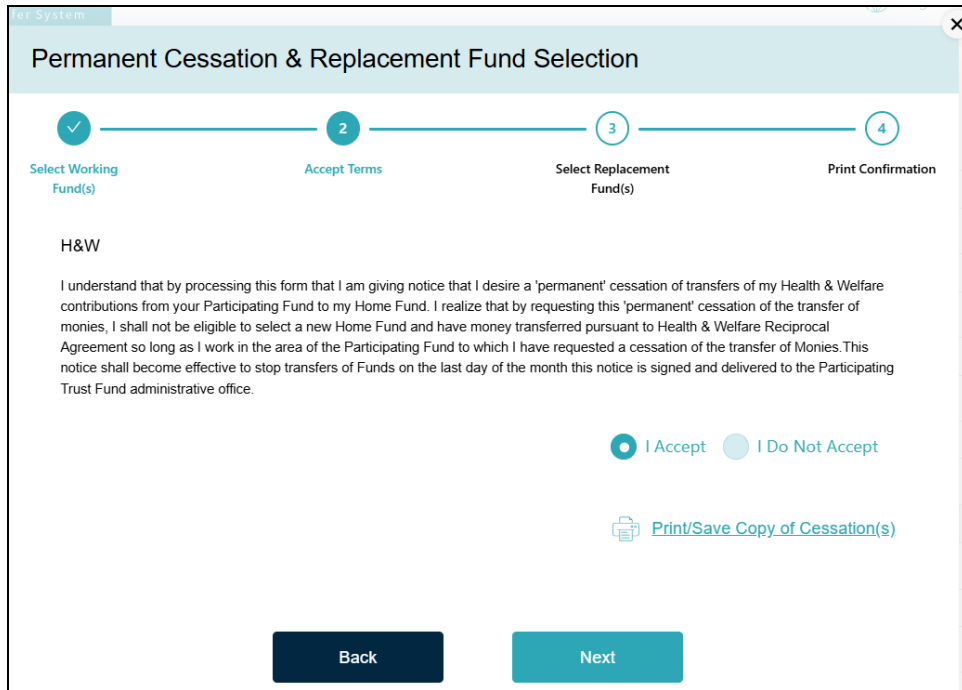


Figure 20 – Permanent Cessation Terms and Agreement

The participant can print or save a copy of the permanent cessation by clicking the **Print/Save Copy of Cessation(s)** link on this page. To continue the workflow, the participant must click the **I Accept** radio button to complete the electronic signature process and continue to the selection of replacement funds.

Click **Next** to get the replacement home local union and home fund selection page where you can select the home local union and home fund. Note you cannot complete the workflow without these selections (figure 21).

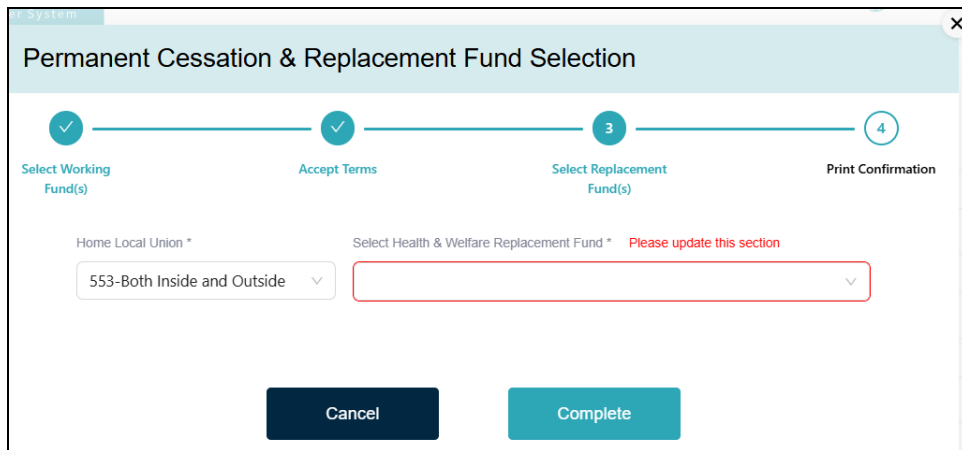


Figure 21 – Replacement Local and Fund Selection

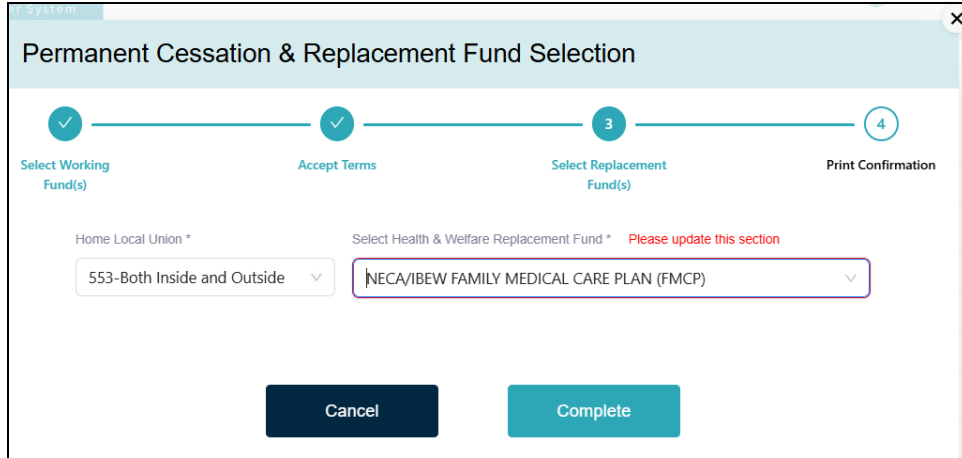


Figure 22 – Correct Replacement Local and Fund Selection

Click **Complete** after selecting the new home local union and home fund to get the *Permanent Cessation & Replacement Fund Selection* confirmation page (figure 23).

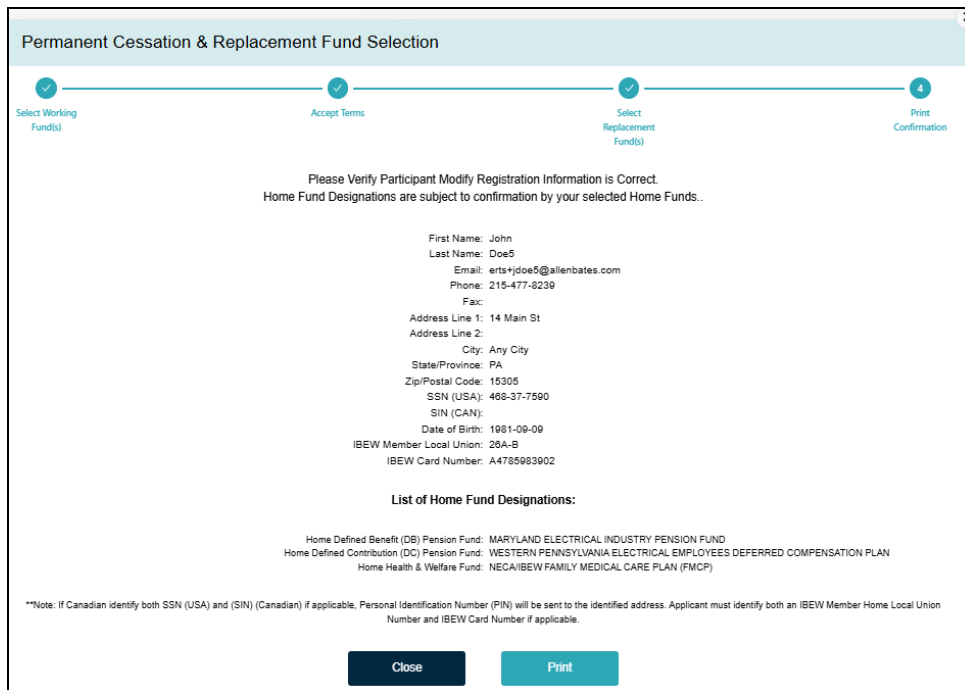


Figure 23 – Permanent Cessation & Replacement Fund Selection Confirmation Page

The participant can print/save this page as documentation of their change by clicking the **Print** button. Click the **Close** button to exit the permanent cessation and blanket authorization home local union and home fund change workflow.



8. Appendix A – Help & Frequently Asked Questions (FAQ)

Allen Bates Technologies will update and maintain this participant user guide that will be available under the Help section of the IBEW ERTS™ application. Allen Bates Technologies will keep a log of the most common questions received. The ERTS™ will periodically be updated with answers to these questions, and they will be posted under the FAQ button to be accessed by all users of the system.