



City of Knoxville Pension System
Public Safety Complex
1650 Huron Street
Knoxville, TN 37917
Phone: (865) 215-7750
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APPLICATION FOR SURVIVOR'S BENEFITS

I WISH TO APPLY FOR A SURVIVOR'S BENEFIT FROM THE CITY OF KNOXVILLE PENSION SYSTEM PER
CHARTER SECTION _____

I AM THE SURVIVOR OF: _____

DATE
RETIRED: _____

DEATH DATE: _____

DEPARTMENT: _____

PLAN: _____

SURVIVOR INFORMATION

NAME: _____

SSN: _____

BIRTHDATE: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

DATE BENEFIT BEGINS: _____

AMOUNT OF BENEFIT: _____

SIGNATURE

DATE

WITNESS

DATE

OFFICE USE ONLY

RECEIVED BY: _____ DATE: _____