



# Master Construction Trade Union Benefit Plan

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**NOTE: TO BE COMPLETED ONLY IF YOU ARE LIVING IN A COMMON-LAW RELATIONSHIP**

**To the Trustees of Group Plan 1515**

I, \_\_\_\_\_ declare that I am living with and have publicly  
*Member's Name*

represented \_\_\_\_\_ as my spouse for a period of at least 12 months.  
*Spouse Name*

I further declare that the following children of myself or spouse, as defined above, are wholly dependent on me in accordance with the provisions of the Federal Income Tax Act.

----- Child's Name	----- Child's Name
----- Child's Name	----- Child's Name
----- Child's Name	----- Child's Name

-----  
Member's Signature

**Witness No. 1**

I, \_\_\_\_\_ declare that \_\_\_\_\_  
*Name, Address & Tel. # (PLEASE PRINT)* *Spouse Name*

has been living with \_\_\_\_\_ and he/she has publicly represented  
*Member's Name*

her/his as his/her spouse for a period of at least 12 months.

-----  
Witness' Signature

**Witness No. 2**

I, \_\_\_\_\_ declare that \_\_\_\_\_  
*Name, Address & Tel. # (PLEASE PRINT)* *Spouse Name*

has been living with \_\_\_\_\_ and he/she has publicly represented her/his as  
*Member's Name*

his/her spouse for a period of at least 12 months.

-----  
Witness' Signature