Instructions: (1) provide information requested below; (2) check an option box and provide appropriate information; (3) sign, date, and return your complete application. **Please return all three pages**: page 1 requires information about you and contains options 1 - 3; page 2 contains options 4 -5; page 3 is a required release and waiver. Pages 2 and 3 require your signature and the date you sign.

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| Name: |  | | | |  | Class and Pay Grade: | | | | |  | | | | | |
| Employee ID Number: | | |  | | | | | |  | Your Pension Tier: | | | |  | |
| Email Address: | |  | | | | |  | Telephone: | | | | |  | | | |
| Requested RIP Start Date: | | | |  | | | | |  | | | MOU: (22 or 23): | | |  |
| (Beginning of a pay period. See payroll calendars on the RIP website.) | | | | | | | | | | | | | | | |

**Check one option box (1 – 5) below.**

|  |  |  |  |  |
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|  |  | **OPTION 1** | | |
|  |  | **I entered DROP prior to July 4, 2021, AND I will exit DROP between July 4, 2021, and December 31, 2022.** | | |
|  |  | I entered DROP on: |  |  |
|  |  | I will exit DROP on: |  |  |
|  |  | OPTION 1 provides a 4.5% RIP pay during **the last pay period of City employment**. | | |

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|  |  | **OPTION 2** | | |
|  |  | **I will enter DROP between July 4, 2021, and December 31, 2023, AND I will exit DROP on or after January 1, 2023.** | | |
|  |  | I will enter DROP on: |  |  |
|  |  | OPTION 2 provides a 4.5% RIP pay for a maximum of 26 pay periods prior to **entering DROP**, or the time between the effective RIP date and December 31, 2022, whichever is less. | | |

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|  |  | **OPTION 3** | | |
|  |  | **I will retire from City employment without entering DROP through a SERVICE pension between July 4, 2021, and December 31, 2023.** | | |
|  |  | I will retire from City employment on: |  |  |
|  |  | OPTION 3 provides a 4.5% RIP pay for a maximum of 26 pay periods prior to **retiring from City employment without entering DROP** through a **SERVICE pension**, or the time between the effective RIP date and December 31, 2022, whichever is less. | | |

***RIP Application and Agreement continued on next page***.

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|  |  | **OPTION 4** | | |
|  |  | **I will retire from City employment without entering DROP through a DISABILITY pension between July 4, 2021, and December 31, 2022.** | | |
|  |  | I filed or will file for a DISABILITY pension on: |  |  |
|  |  | OPTION 4 provides a 4.5% RIP pay for a maximum of 26 pay periods prior to **retiring from City employment without entering DROP** through a **DISABILITY pension**, or the time between the effective RIP date and December 31, 2022, whichever is less. LAFPP staff will work with an employee under this option to determine the appropriate RIP pay dates if and after the disability pension application is approved by the Board of LAFPP Commissioners. | | |

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|  |  | **OPTION 5** | | |
|  |  | **I will enter DROP AND exit DROP between July 4, 2021, and December 31, 2022.** | | |
|  |  | I will enter DROP on: |  |  |
|  |  | I will exit DROP on: |  |  |
|  |  | OPTION 5 provides a 4.5% RIP pay for a maximum of 26 pay periods prior to **entering DROP**, or the time between the effective RIP date and December 31, 2022, whichever is less.  OPTION 5 also provides a 4.5% RIP pay during **the last pay period of City employment**. | | |

I understand and acknowledge that, if I do not enter DROP, exit DROP, or retire within six months of the date(s) I have specified on this application, I must, ***immediately and upon demand,*** repay to the City the value of the RIP pay, as calculated by the CAO. Repayment of RIP is not be subject to the grievance procedure, arbitration, or the Dispute Resolution Committee process.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature |  | Date |

**Remember to submit pages 1, 2, and 3 of your   
RIP Application and Agreement.**

***RIP Application and Agreement continued on next page***.

**RELEASE AND WAIVER**

In consideration for the City’s payment of compensation as set forth above, I freely, voluntarily, completely, and permanently release the City, its governing bodies, and all officials, employees, agents and any others acting for it (collectively “Releasees”), from any and all claims arising out of or related to my employment with the City which I now have, or which may hereafter accrue, and/or which may result from participation in the RIP and this Employee Agreement, including but not limited to claims of constructive discharge, all federal, state, local, administrative, civil service, collective bargaining, and other claims. I agree not to bring any grievance, arbitration, lawsuit, or other proceeding against the City and release all claims resulting in any way from the City’s offering and my acceptance of the RIP and/or arising out of or related to my employment with the City, and hereby waive any right to bring those claims in any forum. I understand that any action by me in violation of this promise may result in a civil suit against me for breach of this Employee Agreement.

I realize there may be unknown facts or claims which, had they been known today, would or could affect my decision to sign this Employee Agreement. Unless waived, Civil Code Section 1542 protects such unknown claims for automatically being given up in a general release. It states:

*“A general release does not extend to the claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release, and that, if known by him or her would have materially affected his or her settlement with the debtor or released party.”* (Amended by Stats. 2018, Ch. 157, Sec. 2. (SB 1431) Effective January 1, 2019)

I knowingly and voluntarily waive any and all rights under Civil Code Section 1542, stated above, and hereby release the City from any and all claims which would have been affected by that statute. This release and waiver extends to and is binding upon my heirs, executors, administrators, assigns, and my community estate.

By signing the Employee Agreement to participate in the RIP, I also waive any claim or right I have to challenge this agreement or my retirement on age discrimination or other grounds under the Age Discrimination in Employment Act of 1967 (ADEA). I understand that I have been or are hereby advised to consult with an attorney of my own choosing before signing this release of ADEA claims. My rights or claims under the ADEA which arise after this Employee Agreement is signed, are not waived.

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| Signature |  | Date |