



Public Employees' Retirement System of Nevada

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Toll free 1-866-473-7768 Website: www.nvpers.org

Disability Conversion Authorization

A disabled retired employee may elect to change from a disability retirement to a service retirement by completing the below form and submitting it to a PERS office. If you change to service retirement, the annual Disability Employment and Earnings Statement will no longer be required, and you will be subject to the laws pertaining to service retirement.

Prior to making your decision to convert from a disability retirement account to a service retirement account it is recommended that you contact a tax professional and/or any supplemental insurance that you receive to confirm that this election will not impact your taxes and/or insurance. Retirement counselors are available to discuss converting from disability retirement to service retirement, should you have any further questions before completing this form.

Name: _____ Last Four Digits of SSN: _____

Daytime Phone: _____ Personal Email: _____

I authorize the Public Employees' Retirement System (PERS) to convert my disability retirement account to a regular service retirement account under the same option effective on the first of the month following the date this form is received in the PERS office. As of that date, my age and service credit (select only one option below):

_____ **do** meet the requirements for service retirement without reduction.
Initial

OR

_____ **do not** meet the requirements for service retirement without reduction.
Initial

I understand that, by making this conversion, I will no longer be required to provide annual earnings information and that I will be subject to the reemployment laws which govern service retirement. I understand that as a PERS service retiree, I am prohibited from reemployment with a Nevada public employer except as provided by NRS 286.520.

I understand that this conversion is permanent and that I cannot return to a disability retirement once the conversion has become effective. I fully understand and agree with all terms and conditions listed above.

Retiree's Signature

Date