**53707**



**NOTICE OF IRREGULAR SALARY OR NO DEPOSIT**

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

SFN 53707 (Rev. 01-2014)

**NDPERS • PO Box 1657 • Bismarck, • North Dakota 58502-1657**

**(701) 328- 3900 • 1-800-803-7377 • Fax 701-328-3920**

|  |  |
| --- | --- |
| **PART A MEMBER INFORMATION** | |
| Name (Last, First, Middle) | NDPERS Member ID |
| Last 4 digits of Social Security Number | Date of Birth |
| Organization Name: {stdCurrentEmployerOrgName} | NDPERS Organization ID  {stdCurrentEmployerOrgCodeID} |
| **PART B NOTICE OF IRREGULAR SALARY OR MISSED DEPOSIT** | |
| Leave of Absence/Leave without Pay (Notice of Status or Employment Change SFN 53611 is attached) | |
| Hourly Employee – Hours Vary from Month to Month | |
| Reporting Error – Salaries should be credited as follows:  (Month) $ (Amount)  (Month) $ (Amount) | |
| Retirement Contributions Missed on All or a Portion of a Previous Salary – Salaries should be credited as follows:  (Month) $ (Amount)  (Month) $ (Amount) | |
| Seasonal Employee  Employee and Employer have a formal salary arrangement/contract in place.  Excess Salary to be annualized over current contract year:  Excess Salary $ to be distributed  from (Month/Year) to (Month/Year)  Employee and Employer have **no** formal salary arrangement/contract in place.  Excess Salary $ to be distributed over physical work period  from (Month/Year) to (Month/Year) | |
| Membership Termination (Notice of Status or Employment Change SFN 53611 is attached) | |
| Other: | |
| **PART C AUTHORIZATION OF AUTHORIZED AGENT** | |
| I certify that the above information is true and correct.  Authorized Agent Signature Date of Signature | |



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INSTRUCTIONS

**Part A Member Information**

Enter member’s name and NDPERS ID, last four digits of social security number, and date of birth

**Part B Notice of Irregular Salary or No Deposit**

Complete this section to document:

1. An irregular salary
2. A missed retirement contribution
3. A seasonal employee’s salary agreement

Complete this section to:

1. To direct an adjustment to a previously posted salary(ies)
2. To initiate a bill to your agency for a missed contribution

**Part C Authorization of Authorized Agent**

Your agency’s designated PERS authorized agent must sign and date this form.