Sheet Metal Workers' & Roofers' Local 30
190 Milner Avenue Toronto, ON M1S 5B6 website: www.smwia-L30.com
Tel: (416) 299-7260 Toll Free: 1-800-268-3562 Fax: (416) 299-7734

Jason Addison
Business Manager/Financial Secretary

Blair Gallant
President

Sheet Metal
Bereavement Benefit Coverage

Dear Brothers and Sisters:

In the 2001 Contract Negotiations, it was agreed by Memorandum of Settlement between the Ontario Sheet Metal and Air Handling Group and the Ontario Sheet Metal Workers' and Roofers' Conference dated May 4, 2001, that the employers covered by the Collective Agreement Would make a $0.02 contribution to a bereavement fund for each hour worked by each of their employees.

The Board of Trustees consists of Brothers Jason Addison, Jeff White and Mike Dingman. After monitoring the monthly contributions, and taking into account the size of our membership, the Board has set in place the following guidelines and extent of coverage.

For deaths that occur on or after January 1, 2024, Bereavement Pay Benefits in the amount of up to $300.00 per day shall be paid to any member for up to three (3) full days of lost work, or opportunity to work, in relation to the member's attendance at a funeral or memorial service upon the death of a member's Spouse, Child, Stepchild, Parent, Stepparent, Parent-in-Law, Grandparent, Sibling or Stepsibling. Bereavement Pay Benefits in a lesser amount than $300.00 per day may be paid if a member was lost less than a full day's work or opportunity to work.

Bereavement Pay Benefits shall only be paid to members who:

a) were employed at the time of the funeral or memorial service and were not reimbursed for lost wages for the days claimed by their employer, or were properly registered for work through the Union's hiring hall and were otherwise willing to work;

b) if employed at the time of the funeral, obtain a Declaration Letter, from their employer for confirmation that the member was away from work for the day(s) in question and was not reimbursed by the employer for the time lost from work due to bereavement;

c) have filed a claim for benefits on the required form within 60 calendar days of the death of one of the above-described persons;

d) at the time of funeral or memorial service, have entitlement to welfare benefits under the Sheet Metal Workers' Local Union 30 Welfare Plan;

e) provide a photocopy of the deceased person's death certificate within 60 calendar days of death.

Claims should be submitted to:

Bereavement Fund Trustees
S.M.W.I.A. Local 30
190 Milner Avenue
Toronto, ON M1S 5B6

or email to: chanes@smwia-L30.com

The Trustees look forward to assisting you in easing the financial burden and hardship that occurs at a time of great loss.

Fraternally yours,

Jason Addison, Business Manager
Financial Secretary/Treasurer
On behalf of the Board of Trustees
S.M.W.I.A. Local 30 Bereavement Trust Fund

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Bereavement Benefit Form – Sheet Metal Workers

_____ _____ _____
First Name Initial Last Name

_____ _____ _____
Street # Street Name Apt. #

_____ _____ _____
City Province Postal Code

_____ _____
Area Code Telephone

_____ _____
Membership Number Social Insurance Number

MUST BE COMPLETED BY MEMBER

1. I hereby claim $_____* per day for _____ 20____
(dates not worked)
during which I was away from or unavailable for work because I was attending a funeral or memorial service for _____.
(name of deceased)

2. The deceased person was related to me as a (please check appropriate box):

☐ Spouse ☐ Brother / Stepbrother

☐ Child / Stepchild ☐ Sister / Stepsister

☐ Parent / Stepparent ☐ Grandparent

☐ Parent-in-Law

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3. At the time of the funeral or memorial service I was a Member in good standing of the Sheet Metal Workers' International Association, Local Union 30, I was:

(Check one)

☐ (a) employed by _____ and did not receive any reimbursement for lost wages for the days claimed above (member must supply a letter from his or her employer confirmation wage loss);

☐ (b) was unemployed, but properly registered on the Union's out of work list and otherwise available for employment; or

☐ (c) other: (please explain)

_____

_____

✓	All members claiming bereavement benefits must file a claim and submit a copy of the deceased person's death certificate within 60 calendar days of the death.
✓	To qualify for benefits, members must have entitlement to welfare benefits under the Sheet Metal Workers' Local Union 30 Welfare Plan.

DATED this _____ day of _____ 20 _____

_____
Member's signature

**Note 1:* *The maximum claim is $300.00 per day for up to 3 days. A lesser amount than $300.00 per day may be paid if a Member has lost less than a full day's work or opportunity to work. Bereavement Pay Benefits are payable in relation to deaths which occur on or after January 1, 2024.*

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