



## Registered Pension Plan Change of Information

You can use this form to let the Registered Plans Directorate know of changes to contact information for your registered pension plan. Send the completed form to: Canada Revenue Agency, Registered Plans Directorate, Ottawa ON K1A 0L5. If you have any questions, call us at **1-800-267-3100**. From outside Canada and the US, call us collect at **613-221-3105**.

(Please print or type)

Name of pension plan	Registration number
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### Section 1 – Change of address of the pension plan administrator or the contact person of the pension plan administrator

**Note:** Use Form T920, Application to Amend a Registered Pension Plan, when there is a change of plan administrator, trustee, or insurer.

Name of pension plan administrator			
Address			
City	Province/Territory	Postal code	Telephone number
Business number	Contact person	Language of correspondence <input type="checkbox"/> English <input type="checkbox"/> French	

### Section 2 – Change of the authorized correspondent

Name of authorized correspondent			
Address			
City	Province/Territory	Postal code	Telephone number
Business number	Contact person	Language of correspondence <input type="checkbox"/> English <input type="checkbox"/> French	

### Section 3 – Change of address of the authorized correspondent

Name of authorized correspondent			
Address			
City	Province/Territory	Postal code	Telephone number
Business number	Contact person	Language of correspondence <input type="checkbox"/> English <input type="checkbox"/> French	

### Section 4 – Change of address of the trustee or the trustee's contact person

**Note:** Use Form T920, Application to Amend a Registered Pension Plan, when there is a change of plan administrator, trustee, or insurer.

Name of trustee			
Address			
City	Province/Territory	Postal code	Telephone number
Business number (unless individual)	Contact person	Language of correspondence <input type="checkbox"/> English <input type="checkbox"/> French	

### Section 5 – Change of address of the insurance company or the insurance company's contact person

**Note:** Use Form T920, Application to Amend a Registered Pension Plan, when there is a change of plan administrator, trustee, or insurer.

Name of insurance company			
Address			
City	Province/Territory	Postal code	Telephone
Business number	Contact person	Language of correspondence <input type="checkbox"/> English <input type="checkbox"/> French	

**Section 6 – Certification**

As an authorized representative of the pension plan administrator, I, \_\_\_\_\_  
certify that the information given on this form is, to the best of my knowledge, correct and complete.

\_\_\_\_\_

Date

Signature

Telephone number

Personal information is collected under the authority of section 147.1 of the Income Tax Act and is used for the administration of a registered pension plan. It may also be used for any purpose related to the administration or enforcement of the Act such as audit and compliance. Information may also be shared or verified under information-sharing agreements to the extent authorized by law. Failure to provide complete or accurate information may result in administrative delays. Under the Privacy Act, individuals have the right to access their personal information and request correction if there are errors or omissions. Refer to Info Source [canada.ca/cra-info-source](http://canada.ca/cra-info-source), Personal Information Bank CRA PPU 226.