

**APPLICATION FOR NORTH CAROLINA NATIONAL GUARD STATE PENSION, N.C.G.S. 127A-40**  
**SEE REVERSE FOR INSTRUCTIONS**

TO: Joint Force Headquarters, North Carolina, ATTN: J9 Retirement Counselor, 1636 Gold Star Drive, Raleigh, NC 27607-6410

I hereby apply for the North Carolina National Guard State Pension. I have read the eligibility criteria for the pension as listed on the reverse of this form and certify that I meet the requirements. Service creditable for retirement is evidenced by (circle form you are enclosing) DARP Form 249-2-E, NGB Form 23C or NGB Form 23.

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Last Name	First Name	Middle	Social Security Number
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Home Address	City	State	Zip Code
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**NOTE: Submission of the attached State Retirement Form 170 is mandatory to permit direct deposit of retirement check to a personal bank account.**

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Date of Birth: _____	Date separated from the NCNG: _____
Month    Day    Year	Month    Day    Year

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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(For Adjutant General's Office use only below line)      Date: \_\_\_\_\_

TO: North Carolina Department of State Treasurer, 325 N. Salisbury St., Raleigh, NC 27611

1. Applicant is considered eligible for the NCNG State Pension by virtue of:

a. Total years service creditable for retired pay: \_\_\_\_\_.

b. Total years NCNG service creditable for retired pay: Over 15 years (mandatory)

c. Eligibility for retired pay under Chapter 67, Title 10 US Code, is verified by documents maintained at this office.

2. Applicant's effective date of retirement is \_\_\_\_\_

	Month	Day	Year
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3. He/She is entitled to a monthly benefit of \$ \_\_\_\_\_. Retroactive pay due amounts to:

Partial month: \_\_\_\_\_ Number of days: \_\_\_\_\_ Amount due: \_\_\_\_\_

Whole month: \_\_\_\_\_ Number of days: \_\_\_\_\_ Amount due: \_\_\_\_\_

Total amount due: \_\_\_\_\_

FOR THE ADJUTANT GENERAL:

Encl  
Ret-170 Form

DAVID W. SMITH  
LTC, EN, NCARNG  
Director, J9

## **INSTRUCTIONS FOR FILING FOR NCNG STATE PENSION**

1. To be eligible for receipt of the NCNG State Pension in accordance with N.C.G.S. 127A-40, **each member shall (a) Have served and qualified for at least 20 years creditable military service for retirement**, including National Guard, Reserve and active duty, under the same requirement specified for entitlement to retired pay for nonregular service under Chapter 67, Title 10 United States Code; and

(b) **Have at least 15 years of the aforementioned service as a member of the North Carolina National Guard;**  
and

(c) **Have received an honorable discharge from the North Carolina National Guard.**

2. A North Carolina National Guard Pension **will not be paid** to any individual receiving retired pay as a result of length of service, age, or physical disability retirement from any of the regular components of the Armed Forces of the United States.

3. NCARNG personnel separated **prior** to 1 January 1989 should request a Chronological Record of Military Service Creditable for Retired Pay (DARP Form 249-2-E) by writing to U.S. Army Human Resources Command at the time application for Federal retired pay is made. This form verifies total years of service creditable for retired pay.

4. NCARNG personnel separated **after** 1 January 1989 should forward either a copy of DARP Form 249-2-E (see above), NGB Form 23C or NGB Form 23 as evidence of total service creditable for retired pay. A letter may be forwarded with application requesting this office obtain NGB Form 23C from retired data base if not available in personal records.

5. NCANG personnel are requested to submit a copy of Reserve Retired Pay Order and evidence of service in the NC Air National Guard creditable for retired pay and evidence of total years of service in the NC Air National Guard creditable for retired pay.

6. Instructions for completing JFHQ-NC Form 127-1-R:

(a) Complete the top portion of the form only.

(b) Enter complete mailing address to include Zip Code.

(c) If exact date of separation from the NCNG is not known, give an approximate date and indicate that it is approximate.

(d) Mail JFHQ-NC Form 127-1-R and evidence of total years of service creditable for retired pay to the address given at the top of this application (front page).

## **SPECIAL INFORMATION**

1. At the time your application is processed for submission to the State Treasurer (month of your 60<sup>th</sup> birthday), acknowledgement of receipt of your application will be made to include amount of monthly retired pay and approximate date retired pay begins.

2. To insure uninterrupted receipt of monthly payments, all changes in mailing address must be immediately reported to: Department of State Treasurer, State Retirement Systems, 325 North Salisbury Street, Raleigh, NC 27611.

3. The NCNG Pension benefit has no provision under state law to carry over to a beneficiary at the time of death. Ensure your next of kin know to report the death immediately to the State Office listed in paragraph 2 above. Special Instructions: If unreported, the State Treasury Department will recoup all unauthorized monies upon gaining knowledge of death.