

# **Returning Retiree Certification**

(Pursuant to SBCERA Board Benefits Policy No. 032)

P: 909.885.7980 | E: returningretirees@sbcera.org | sbcera.org

Submit this Form:

Mail | 348 W. Hospitality Lane, Suite 100

San Bernardino, CA 92408

Fax | 909.884.1904

Online | returningretirees@sbcera.org

## All SBCERA retirees returning to work in any capacity must be authorized by SBCERA using this form.

Government Code sections 7522.56, 31680.6, 31680.7, 31680.9, and SBCERA Board Benefits Policy No. 032 provides specific employment restrictions for retirees who return to work with an employer in the same public retirement system from which they receive a benefit. These restrictions are intended to prevent a retiree from receiving a monthly SBCERA retirement benefit while also receiving compensation for employment with an SBCERA-covered employer. It is the responsibility of both the retiree and the employer to ensure compliance with our policy, as violations can result in penalties and fees assessed to both.

#### Benefits Policy No. 032 (Retirees Returning to Work)

**Employer:** Use this form to report the details of any return-to-work arrangement with an SBCERA retiree prior to the retired member commencing re-employment. Once you have completed the sections that apply, provide the form to the retiree for review and signature.

**Retiree**: You are required to review and sign this form prior to your commencement of re-employment with an SBCERA-covered employer.

**Note:** If the retiree was granted a Disability Retirement benefit, the employer must complete and submit a Disability Retirement Questionnaire. If the retiree is returning to work as an Independent or Sub-Contractor, the employer and retiree must each complete an Employment Relationship Questionnaire and submit them with the completed Returning Retiree Certification form.

#### Section 1

#### Retiree Information

For security and identification purposes, we require an SBCERA ID.

Retiree's pension benefit may be subject to suspension if Retiree's Effective Date of Re-Employment commences prior to SBCERA's approval of this Certification form.

If your anticipated end date of re-employment will be beyond 18 consecutive months, this approval will be at the discretion of the Board of Retirement, if you meet the requirements stated in the policy.

| Last Name  | First Name   | Middle Initial |
|--|--|----------------|
| Mohr   | Theodore   |                |
| Date of Retirement   | Re-Employment Job Title  |                |
| 03/25/2023   | Captain  |                |
| Effective Date of Re-Employment  | Anticipated End Date of Re-Employm   | ent            |
| 3/10/2025  | 10/31/2025   |                |
| Has retiree previously returned to work under a separate SBCERA certification? Yes | If yes, please indicate the dates of th certification below. (Only complete if certification.) |                |
|  | From 8 1 2023 to 02/01/  | 2025           |
| Is this an initial request or a request to ex                                      | tend employment beyond 18 consecutiv   | re months?     |

#### Section 2

## **Employer Information**

Request to Extend

The information in this section must be completed by a representative from an SBCERA-covered employer. If the retiree is being hired by a third-party (e.g., temp or staffing agency), you will be able to indicate that in a separate section.

| Employer Name                           |                        |
|---|------------------------|
| San Bernardino County Fire F            | Protection District    |
| Name of Your Department (If Applicable) |                        |
|   |                        |
| Phone Number                            |                        |
| 909-387-5956                            |                        |
| Employer Representative                 | Representative's Title |
| James Topoleski                         | Division Chief         |



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| Section 3  | Return to Work – Type of Employment  |
|--|--|
| Returning retiree is subject   |  |
| to the limitation of Government Code Sec. 7522.56.  Note: A direct hire is                 | Choose the nature of the employment relationship (select only one):  Direct Hire  Hired through Staffing/Temp Agency, or other Third-Party   |
| someone who is employed directly by or employed through a contract with your organization. | Independent or Sub-Contractor (If the box above is checked, the employer and retiree must each complete an Employment Relationship Questionnaire and submit them with the completed Returning Retiree Certification form. Additionally, the employer should attach an analysis and/or determination indicating why the position is an independent contractor or sub-contractor. Employment Relationship Questionnaire for Employers – Employment Relationship Questionnaire for Retirees.)  Board Member or Commissioner (STOP and proceed to Sections 7–9 only) |
|  | Volunteer (STOP and proceed to Section 7–10 only)  |
|  |  |
| Section 4  | Certification of Need for Re-Employment  |
|  | Please certify that one or both of the following are true. State law requires at least one of these conditions for a retiree to return to work. Check all that apply.  |
|  | ☐ The re-employment of the retiree is necessary during an emergency to prevent stoppage of public business.  |
|  | The retiree has skills needed to perform work for a limited duration.  |
|  | Is the anticipated end date of employment (listed in Section 1) more than 18 consecutive months from the initial start date of the retiree's re-employment?  |
|  | Yes (If selected, you must complete Section 6)   |
|  | No (If selected, do not complete Section 6)  |
| Section 5  | Employment Details   |
|  | Description of Role (select all that apply):   |
|  | Retiree training replacement.  |
|  | Retiree working in a temporary assignment or working on a special project.   |
|  | ☐ Temporary position due to peak or seasonal workload fluctuation for period   |
|  | to   |
|  | Retiree filling a short-term vacancy need.   |



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|----------------|-----------|
| Last Name      | Page 3 of |

| Section 5   | Employment Details (Continued)   |
|---|--|
| You may attach a<br>supplemental document that<br>answers this question.  | Please provide a summary description of the duties the retiree is performing within this role:  Operating heavy equipment on emergency scenes to include wildland fires,   |
|   | structure fires, floods, debris flows, urban search and rescue. Role will include driving a transport and trailer with equipment to work site locations.   |
| SBCERA's Retirees Returning<br>to Work policy requires that   | Are you actively recruiting for this role?   |
| an employer shall be actively recruiting for a permanent  | Yes (If yes, please describe your recruitment efforts.)  The Fire District is requesting to dual-fill one of our two heavy equipment operator  |
| replacement for the position  |  |
| being occupied by a retiree,<br>unless the position is  | positions, and the Division Chief is currently collaborating with County Recruitment   |
| temporary or seasonal.  | to revise the requirements and initiate the recruitment process.   |
|   | No   |
| SBCERA policy requires employer to certify that a returning retiree who was granted a Disability Retirement will not be performing duties or activities the retiree is restricted from performing because of their disability.            | Was the returning retiree granted a Disability Retirement benefit?  Yes (If selected, employer must complete and submit Disability Retirement Questionnaire.)  No  |
| The retiree shall not be eligible to serve or be employed by a public employer if, during the 12-month period prior to returning to employment, the retired person received any unemployment insurance. See Gov. Code Sec. 7522.56(e)(1). | During the 12 months prior to re-employment, did the retiree receive unemployment insurance compensation from prior employment with an SBCERA participating employer?  Yes  No   |
| Rate of pay for employment<br>shall not be less than the<br>minimum, nor exceed the<br>maximum, paid by the<br>employer to other employees  | What is the salary range paid to similarly situated employees performing similar duties according to the employer's publicly posted salary schedule? (If salary range is a monthly amount, divide the monthly rate by 173.33 to calculate an hourly rate.)  Job Title Heavy Fire Equipmet Operator |
| performing comparable duties. See Gov. Code Sec.  | Salary Minimum § 40.13 (per hour)  |
| 7522.56(d).   | 51.40  |
|   | Salary Maximum \$ 51.40 (per hour)   |

What will be the returning retiree's hourly pay rate?

\_\_\_ (per hour)

<sub>\$</sub>48.91



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| Section 5   | Employment Details (Continued)  |
|---|---|
|   | Will the re-employment start within 180 days following the retiree's date of retirement?  |
|   | Yes<br>No   |
|   | If the answer is Yes, please check the box that applies to the retiree's re-employment.   |
|   | The retiree is a public safety officer or firefighter, and the re-employment is for the performance of functions regularly performed by a public safety officer or firefighter.   |
|   | ☐ The re-employment is necessary to fill a critically needed position, and the re-employment has been approved by the governing body of the agency in a public meeting on the non-consent calendar (Employers must submit the minutes from the meeting where the employment was approved by its governing board.) |
| A member who retires at<br>an age younger than the<br>normal retirement age<br>must have at least a | Is the retiree a general member under the normal retirement age of 55 or a safety member under the normal retirement age of 50?  Yes (If selected, answer questions A and B below)  |
| continuous 60-day break in ervice from the date of the  | No (If selected, skip questions A and B below)  |
| member's last day of<br>employment prior to being<br>re-employed while retired                      | A. Was there a verbal or written agreement between employer and the retiree regarding this position prior to his/her retirement?  |
| by any SBCERA-covered employer.   | Yes (If selected, stop completing this form and contact SBCERA immediately.)  |
|   | B. Has it been at least 60 days since the retiree's date of separation of employment?   |
|   | Yes  No (If selected, stop completing this form and contact SBCERA immediately.)  |

Instructions: If you selected Yes in the last question of Section 4, you must proceed to Section 6. If you selected No, then skip to Section 7.



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## Section 6

# **Beyond 18 Consecutive Months Supplemental Questions**

Only members who selected
Yes to the last question in
Section 4 should complete
this section. Do not
complete if this is an initial
request.

You may attach a supplemental document that answers the questions in this section.

When you're done with this section, please proceed to Section 7.

SBCERA Board of Retirement policy requires the following conditions to be met before the retiree can be re-employed beyond 18 consecutive months:

- Re-employment is necessary to enable the employer to continue effective operations in light of genuinely extreme necessity that is unavoidable or could not have been anticipated.
- Re-employment is limited to the completion of a discrete quantity of genuinely limited work
  that one would expect to be completed at a foreseeable time, such as the completion of a
  special project.

Your answers to the following questions will help SBCERA staff determine if the requested reemployment meets the conditions above. Staff will then take their recommendation to the Board for approval. Any re-employment beyond 18 consecutive months must be approved by the Board of Retirement. **Please complete the following supplemental questions:** 

- How many hours a week does/will the SBCERA retiree work?
   Variable. Mohr will be designated for emergency work on an as-needed basis.
- 2. What special skills does the SBCERA retiree have to perform the duties of the position? Heavy equipment expertise and Class A driver's license.
- Why is the re-employment of the SBCERA retiree necessary?
   Currently, there is a lack of qualified personnel available during emergencies.
- 4. If the re-employment is unavoidable or could not have been anticipated, please explain why. We are actively developing and implementing programs to address this issue in the future.
- 5. If the agency cannot continue to re-employ the SBCERA retiree, what will it do?

  The absence of qualified personnel leaves equipment uncovered during emergencies.
- 6. What will the detriment be to the public, job tasks, programs, or projects the SBCERA retiree is working on if employment is not extended?
  - Heavy fire equipment may be unavailable for emergency response due to staffing shortages.
- Is anyone else able to do the SBCERA retiree's current job?
   Yes, we will rely on current employees. In their absence, Mr. Mohr will be called to work.
- 8. What measures is the agency taking to ensure it will have qualified employees on staff when the retiree's extension ends?

Recruitment and training efforts are ongoing.

| 9. | If this retiree does not perform the work, will there be a stoppage of public business? |
|----|---|
|    | Yes   |
|    |   |

10. Who would perform this work if the retiree was not available?

No, one

11. Is there anyone else currently working for the agency that can perform these functions?

Mr. Mohr will only be utilized in the absence of existing employees.



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## Section 7 Employer Acknowledgements

Employer must acknowledge by signing below that they have read and understand these statements.

This section must be competed and signed by a representative from an SBCERA-covered employer. If the retiree is being hired by a third-party (e.g., temp or staffing agency), the third-party does not sign this certification.

If the retiree is a member of a Board or Commission or serves as a volunteer, some of the provisions outlined in this section may not apply directly. However, you should be aware of these provisions should the conditions of employment change.

Note: The employer and retiree will be required to reimburse SBCERA for reasonable administrative expenses incurred in responding to the violation.

Employer must As a participating employer, you have read and understand the following:

- Returning retiree will not work more than 960 hours during any fiscal year (July 1—June 30) and tracking of these hours is the responsibility of the retiree and employer.
- Retiree's pay will not be less than the minimum nor more than the maximum paid to other employees performing comparable job duties.
- While SBCERA and the employer will cooperate to facilitate compliance with the terms of California Gov. Code sections 7522.56, 31680.6, 31680.7, 31680.9, and SBCERA Board Benefits Policy No. 032, compliance is ultimately the retiree's responsibility.
- A member who retires at an age younger than the normal retirement age must have at least a continuous 60-day break in service from the date of the member's last day of employment prior to being reemployed while retired by any SBCERA-covered employer.
- Failure to comply with any of the returning retiree requirements may result in reinstatement
  from retirement. Reinstatement has serious consequences for the retiree and the employer.
  These consequences are effective on the date the re-employment ceased to comply with the
  returning retiree restrictions and include the following:
  - Suspension of member's retirement pension benefit payments. Additionally, the member will be required to return all benefit payments received during the period of violation.
  - SBCERA will collect retirement contributions with interest from the retiree and the employer on any pay received by the retiree during any period of unlawful reemployment.
  - Retiree will earn a new retirement benefit during the period of re-employment that was not in compliance with the law.
  - Employers will be subject to a \$200 fine per retiree, per month if SBCERA has not approved the retiree's Returning Retiree Certification form within 30 days of the effective hire date or if the employer fails to report the pay rate and hours worked by a retiree within 30 days of the last day of the pay period in which the retiree worked.
  - Employer and/or retiree will be subject to any other consequence provided by law.

In addition to the terms and conditions herein, the employer agrees to comply with:

- (1) California Government Code section 7522.56
- (2) California Government Code section 31680.6
- (3) California Government Code section 31680.7
- (4) California Government Code section 31680.9
- (5) SBCERA Board Benefits Policy No. 032

**Annual Reporting:** Employers shall report the following to SBCERA not later than 10 business days after the end of each fiscal year: a list of all SBCERA retirees working in any capacity, including: direct employment or as independent contractors contracted directly with the employer, along with the total number of hours worked for each retiree during the fiscal year.

**Notice of Violation:** An employer shall notify SBCERA within two business days of the discovery that a retiree has exceeded 960 hours worked in a fiscal year or the limited duration period.

**Recruitment Prior to and During the Return to Work of a Retiree:** An employer shall be actively recruiting for a permanent replacement for the regular position being occupied by a retiree, unless the position is temporary or seasonal.

**Substantial Compliance:** If genuine documentation regarding the re-employment of a retiree is submitted as required by this Policy and accepted by SBCERA as adequate at the time of the re-employment, this shall be considered conclusive evidence that the re-employment was commenced in compliance with applicable law. The CEO or designee shall notify the employer in writing of the



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#### Section 7

## **Employer Acknowledgements (Continued)**

This form will be rejected if this section is not complete.

> Retiree must complete Section 8 and return to employer.

I have read the foregoing Employer Acknowledgments and understand the limits placed on SBCERA retirees returning to work for SBCERA-covered employers. Furthermore, I certify that all statements herein are true to the best of my knowledge.

I declare under penalty of perjury all the foregoing statements to be true and correct.

Executed on \_\_2/18/2025 .at San Bernardino, CA City, State

∡James Topoleski

Employer Representative's Printed Name

# Employer Representative's Signature

## Section 8

## Retiree Acknowledgements

Retiree must acknowledge by signing below that they have read and understand these statements.

If you are a member of a Board or Commission or serve as a volunteer, some of the provisions outlined in this section may not apply directly to you. However, you should be aware of these provisions should the conditions of your employment change.

Note: The employer and retiree will be required to reimburse SBCERA for reasonable administrative expenses incurred in responding to the violation.

As a returning retiree, you have read and understand the following:

- You shall not work more than 960 hours for any single SBCERA-covered employer or cumulatively for multiple participating employers during any fiscal year (July 1-June 30). You are responsible for tracking these hours.
- Your pay will not be less than the minimum nor more than the maximum paid to other employees performing comparable job duties.
- While SBCERA and the employer will cooperate to facilitate compliance with the terms of California Gov. Code sections 7522.56,31680.6, 31680.7, 31680.9, and SBCERA Board Benefits Policy No. 032 compliance is ultimately your responsibility.
- If you retire at an age younger than the normal retirement age, you must have at least a continuous 60-day break in service from the date of your last day of employment prior to being reemployed while retired by any SBCERA-covered employer.
- Failure to comply with any of the returning retiree requirements may result in reinstatement from retirement. Reinstatement has serious consequences for the retiree and the employer. These consequences are effective on the date the re-employment ceased to comply with the returning retiree restrictions and include the following:
  - Suspension of your retirement pension benefit payments, Additionally, you will be required to return all benefit payments received during the period of violation.
  - SBCERA will collect retirement contributions with interest from you and your employer on any pay received by you during any period of unlawful re-employment.
  - You will earn a new retirement benefit during the period of re-employment that was not in compliance with the law.
  - Employer and/or you will be subject to any other consequence provided by law.

In addition to the terms and conditions herein, the retiree agrees to comply with:

- California Government Code section 7522.56 (1)
- (2)California Government Code section 31680.6
- (3) California Government Code section 31680.7
- California Government Code section 31680.9 (4)
- SBCERA Board Benefits Policy No. 032 (5)

Substantial Compliance: If genuine documentation regarding the re-employment of a retiree is submitted as required by this Policy and accepted by SBCERA as adequate at the time of the reemployment, this shall be considered conclusive evidence that the re-employment was commenced in compliance with applicable law. The CEO or designee shall notify the employer in writing of the acceptance of the documentation required by this policy.



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| Section 8  | Retiree Acknowledgements (C            | Continued)   |
|--|--|--|
| This form will be <i>rejected</i> if this section is not complete. |  | nowledgments and understand the limits placed on me, k for SBCERA-covered employers. Furthermore, I certify he best of my knowledge. |
|  | Executed on <u>2/19/2025</u> , at      | e foregoing statements to be true and correct.  San Bernardino, CA  City, State  |
|  | XTheodore Mohr<br>Retiree Printed Name | X<br>Retiree Signature   |

## **RETURN COMPLETED FORM TO:**

| San Bernardino County departments should submit this form to San Bernardino County Human Resources for processing. | ATTN: Employee Benefits and Services 157 West Fifth Street, First Floor  | OFFICE: (909) 387-8304<br>FAX: (909) 387-6075  |
|--|--|--|
| All other employers should submit this form to SBCERA.   | San Bernardino County Employees' Retirement Association<br>ATTN: Member Services<br>348 W. Hospitality Lane, Suite 100<br>San Bernardino, CA 92408 | OFFICE: (909) 885-7980<br>or (877) 722-7321<br>FAX: (909) 884-1904<br>Email:<br>returningretirees@SBCERA.org |

# FOR SBCERA USE ONLY

| Expected End Date Approved by SBCERA |
|--------------------------------------|
|                                      |
| Accepted and Approved by SBCERA      |
| Signed On:                           |
| By:                                  |
|                                      |
| Printed Name                         |
| te:                                  |

Approval of this form by SBCERA entitles employer and employee to the conclusive presumption that the re-employment has commenced lawfully, so long as all statements made herein are true. A copy will be returned to the employer and employee.



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|---------------------|-------------|---|
|---------------------|-------------|---|

Instructions: Only complete one of the following supplemental sections if you are a member of a Board or Commission or serve as a volunteer.

| Section 9   | Board or Commission   |
|---|---|
| Only complete this section if   | Board/Commission Name:  |
| the retiree is a member of a Board or Commission.   | Term of Appointment/Election:   |
| Provide information about   | Start Date Anticipated End Date   |
| the retiree's service on the Board/Commission.  | Per Diem Paid to All Board/Commission Members \$ (per meeting)  |
| SBCERA retirees are allowed   | Meeting Frequency:  |
| to serve on the Boards and<br>Commissions of  | Does retiree receive any additional benefits such as health or dental insurance?  |
| Participating Employers and receive the same per diem   | Yes   |
| payment as other members of the Board or Commission,  | ○ No  |
| without being subject to returning retiree restrictions.  | If the answer above is Yes, provide details about additional benefits:  |
|   |   |
|   |   |
|   |   |
| You've completed the rec  | uired section that applies to Boards/Commissions. Employer should return the form to  |
| You've completed the rec  | uired section that applies to Boards/Commissions. Employer should return the form to  |
| You've completed the rec  | uired section that applies to Boards/Commissions. Employer should return the form to  Volunteer   |
| Section 10 Only complete this section if  |   |
| Section 10 Only complete this section if the retiree is a volunteer.  | Volunteer   |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any  | Volunteer Position:   |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any SBCERA-covered employer without being subject to   | Volunteer  Position:  Estimated Work Hours Per Week:  |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any SBCERA-covered employer without being subject to Return to Work requirements so long as they are not                       | Volunteer  Position:  Estimated Work Hours Per Week:  |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any SBCERA-covered employer without being subject to Return to Work requirements   | Volunteer  Position:  Estimated Work Hours Per Week:  Describe volunteer duties:  |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any SBCERA-covered employer without being subject to Return to Work requirements so long as they are not compensated for their | Volunteer  Position:  Estimated Work Hours Per Week:  Describe volunteer duties:  Does retiree receive any additional benefits such as health or dental insurance?          |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any SBCERA-covered employer without being subject to Return to Work requirements so long as they are not compensated for their | Volunteer  Position:  Estimated Work Hours Per Week:  Describe volunteer duties:  Does retiree receive any additional benefits such as health or dental insurance?          |
| Section 10  Only complete this section if the retiree is a volunteer.  SBCERA retirees are allowed to volunteer with any SBCERA-covered employer without being subject to Return to Work requirements so long as they are not compensated for their | Volunteer  Position:  Estimated Work Hours Per Week:  Describe volunteer duties:  Does retiree receive any additional benefits such as health or dental insurance?  Yes  No |

You've completed the required section that applies to volunteers. Return the form to SBCERA.