Information for Survivors of USCG, USCGR, NOAA and PHS Retirees

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Information for Survivors of USCG, USCGR, PHS, and NOAA Retirees

Contents Page

Filing Report of Death 1
Introduction 1
Un-cashed retired paychecks or direct deposit payments 1
Supporting Documentation 1
Unpaid Retired Pay 2
Procedure 2
Who may receive payment? 2
Survivor Annuities 3
General 3
Cost of living adjustments 3
Annual certification of eligibility 3
Annuities for children 3
Court Appointed Guardianship required 4
Federal Benefits 5
Introduction 5
Death of a Veteran 5
VA Burial Allowance 5
Burials and Memorials 6
Burials and Memorials 7
Burial at Sea ALCOAST 8
Headstones and Grave Markers 8
Presidential Memorial Certificate 8
Dependency and Indemnity Compensation (DIC) 9
VA Non-Service Connected Death Pension 10
Social Security Lump Sum Death Payment 10
Social Security Survivor Benefits 10
Veterans Group Life Insurance (VGLI) 11
VA Life Insurance Programs 11
Medical Care At Uniformed Facilities 12
VA Dependents Educational Assistance 12
Health Insurance and Health Care through TRICARE 12
Supplemental Insurance Plans for those enrolled in TRICARE Standard 14
TRICARE Contractors Contacts 15
TRICARE Retiree Dental Program 15
DEERS 15
ID Cards 16
RAPIDS 17
Common Questions Asked After Death of a Retiree 18
Introduction 18
Questions and answers 18
Applying for Final Retired Pay Due 20
Beneficiaries 20
Required Documentation 20
Filing Application 20
Payment 20
Claim for Final Retired Pay (CG PPC-3867) 21
Instructions for Completing Application for Annuity (CG-1884) 22

Filing Report of Death

Introduction

Coast Guard Pay & Personnel Center's (PPC) Retiree and Annuitant Services (RAS) must be notified upon the death of a retired Coast Guard, NOAA or PHS member.

Prompt notification is necessary so payment may be made of any funds due the retiree's eligible survivors.

The next of kin, or person representing next of kin, should notify PPC (RAS) by calling this toll free number:

☎1 866 772-8724

Other agencies to notify:

The Department of Veterans Affairs (☎1 800 827-1000)
The Social Security Administration (☎1 800 772-1213), or local office.

Un-cashed retired paychecks or direct deposit payments

Retired pay stops upon the death of the retired member. The next of kin must return, to PPC, all unnegotiated retired paychecks or direct deposit payments disbursed after the date of the retiree's death.

Supporting Documentation

You may need several documents to support your claims for various survivor benefits from the Coast Guard, and from various other agencies. Documents you will most likely need are as follows:

- Death certificate (stating cause of death)
- DD Form 214 or NOAA Form 56-16 (Unless a Reserve with less than 90 days consecutive Active Duty service and no Title 10 recall)
- Retirement orders
- Marriage certificate(s)
- Divorce decree(s)
- Birth certificate(s)

Unpaid Retired Pay

Procedure

When the notification of the death of a member is received, PPC (RAS) will send the designated beneficiary or next of kin a claim form on which to apply for the member's unpaid pay with instructions regarding its completion. Forms and procedures are also included in this booklet to speed the process.

Who may receive payment?

Retired pay due up to the date of a member's death is payable to the surviving person or person in the order of precedence provided on the Form. (Please see pages 21 and 22.)

For assistance, please contact PPC RAS at 1-866-772-8724.

Survivor Annuities

General

The Application for Annuity (CG-1884), with instructions for its completion, is provided on pages 17 and 18 for use if the retired member was participating in one of the following plans:

- Retired Serviceman's Family Protection Plan
- Reserve Component Survivor Benefit Plan
- Survivor Benefit Plan

Cost of living adjustments

Annual cost-of-living adjustments (COLAs), based on the Consumer Price Index, will be applied to annuities as authorized by law.

Annual certification of eligibility

Annuitants under age 55 are required to annually provide PPC (RAS) with certification of eligibility to continue receiving an annuity.

- PPC (RAS) will notify you of this requirement each year during the month of your birth, and you will be asked to complete, sign, and return a certification form.

Annuities for children

If an annuity is established for a retired member's dependent child or children, the annuity will be paid to a guardian until the child reaches the age of majority.

- The annuity may continue beyond age 18, up to age 22, if the child is a full-time student at an approved educational institution. Certification of school attendance must be provided.
- If the child is physically or mentally incapacitated the SBP annuity can be paid for the child's lifetime. If disability is not deemed permanent a current medical statement must be submitted every 2 years. The forms will be provided by PPC.
- A Report of Existence is required on a semi-annual basis. The forms will be provided by PPC.

Continued on next page

Survivor Annuities, Continued

Court Appointed Guardianship required

If it is necessary to establish an annuity account for a mentally incompetent annuitant, either a court appointed guardianship must be established or a representative payee must be designated by the Coast Guard in accordance with requirements found at 10 U.S.C. 1455.

- A Power of Attorney or a Durable Power of Attorney is not acceptable.
- A Semi-Annual Report of Existence is required when an annuity is payable to a guardian or other representative. Report forms and instructions will be provided by PPC (RAS).
- For assistance please contact PPC (RAS) at 1-866-772-8724.

Federal Benefits

Introduction

The employment of an attorney or agent to process claims for survivor benefits is not necessary. Advice and assistance may be obtained from a casualty assistance officer at a military installation, the American Red Cross, or service organizations such as the American Legion, Veterans of Foreign Wars, and Disabled American Veterans. The following government agencies are also available to assist you:

Subject	Contact
Department of Veterans Affairs Benefits	Local VA office or call 1 800 827-1000
Social Security Benefits	Local Social Security Office or call 1 800 772-1213
Medical and TRICARE	Call 1 800 942-2422
ID Cards	Local military ID card issuing office

Death of a Veteran

The VA should be notified of the death of any veteran enrolled in the VA health system or receiving monetary benefits or other services from the VA. To report the death of a veteran to the VA, call 1-800-827-1000.

If the veteran had a Veterans Group Life Insurance (VGLI) policy in force, call 1-800-419-1473. They will instruct you about how to file a claim.

VA Burial Allowance

Who to Contact: Department of Veterans Affairs (VA).

Nature of Benefit:

Survivors of retirees who were receiving VA disability compensation or a VA pension are entitled to an allowance of $300.00 toward funeral expenses. If burial is in a private cemetery, an additional plot allowance of up to $150.00 may also be paid. If the retiree died from service-connected causes, the allowance may be greater.

Military Funeral Honors and Burial Flags

Who to Contact: Funeral Director who contacts 1-877-645-4667 Code #33634 (Generally the Funeral Director will assist in obtaining a flag from any VA regional office or U.S. Post Office. No flag may be issued without a completed VA Form 21-2008, Application for United States Flag for Burial Purposes. Smaller U.S. post offices may not have flags available, however the Funeral Director should direct the person to the proper site to obtain a flag.)

Continued on next page

Federal Benefits, Continued

Military Funeral Honors and Burial Flags (cont'd)

Nature of Benefit:

Every veteran is entitled to have the following at his/her funeral: (1) An American flag to drape the casket, (2) Two or more uniformed military persons, with at least one a member of the veteran's parent service of the Armed Forces, to attend the funeral in uniform, (3) The American flag folded by the Service members and presented to the family with the Service's condolences and (4) Taps played either by bugler or CD.

Burials and Memorials

Many veterans are eligible for burial in a VA or State managed VA cemetery: The National Cemetery Scheduling Office has the primary responsibility for verifying eligibility for burial in VA national cemeteries. A determination of eligibility is usually made in response to a request for burial in a VA national cemetery. To schedule a burial fax all discharge documentation to 1-866-900-6417 and follow-up with a phone call to 1-**800-535-1117**.

Major Categories of veterans eligible for burial in VA cemeteries include:

a. **Veterans and Members of the Armed Forces** (Army, Navy, Air Force, Marine Corps, Coast Guard)

(1) Any member of the Armed Forces of the United States who dies on active duty.

(2) Any Veteran who was discharged under conditions other than dishonorable. With certain exceptions, service beginning after September 7, 1980, as an enlisted person, and service after October 16, 1981, as an officer, must be for a minimum of 24 continuous months or the full period for which the person was called to active duty (as in the case of a Reservist called to active duty for a limited duration).

Continued on next page

Federal Benefits, Continued

Burials and Memorials (cont'd)

b. Members of Reserve Components

Reservists and National Guard members who, at time of death, were entitled to retired pay under Chapter 1223, title 10, United States Code, or would have been entitled, but for being under the age of 60.

c. Commissioned Officers of NOAA and USPHS

In most cases, full time duty after July 29, 1945 will qualify officers of the National Oceanic and Atmospheric Administration or U. S. Public Health Service for burial at VA managed cemeteries. Consult the National Cemetery Scheduling Office for a determination.

Continued on next page

Federal Benefits, Continued

Burial at Sea ALCOAST

Who to Contact: Coast Guard Integrated Support Command, Decedent Affairs Officer (Nearest Coast Guard Unit for Information or call 1-866-772-8724)

Nature of Benefit:

Large Cutter Commanding Officers and Coast Guard Group Commanders may authorize burials at sea, based on operational commitments and the availability of a Coast Guard Cutter. The Integrated Support Command Decedent Affairs Officer coordinates Burial at Sea requests. Due to emotional, logistical and safety factors, next of kin are encouraged not to attend the burial at sea.

Headstones and Grave Markers

Who to Contact:

MEMORIAL PROGRAMS SERVICE (403A)
DEPARTMENT OF VETERANS AFFAIRS
810 VERMONT AVE N.W.
WASHINGTON DC 20420-0001
☎1 800 697-6947 or at www.cem.va.gov/hm.htm

Nature of Benefit:

The VA provides, upon request, a headstone or grave marker free of charge (including shipping and setup) for any deceased retiree interred in a national cemetery. For burial in a private cemetery, the VA headstone or marker is free, but there is a charge for setup which is the responsibility of the retiree's survivors. Next of kin may request that space on the marker be reserved for later inscription of spouse information.

Presidential Memorial Certificate

Who to Contact: Department of Veterans Affairs (VA 202-565-4964 (office) or 202-565-8054 (fax) www.cem.va.gov/pmc.htm

Nature of Benefit:

Upon application, the VA prepares a certificate, which bears the President's signature and expresses the country's grateful recognition of the retiree's service in the Armed Forces.

Continued on next page

Federal Benefits, Continued

Dependency and Indemnity Compensation (DIC)

Who to contact: Department of Veterans Affairs (VA). 1-800-827-1000
http://www.vba.va.gov/bln/dependents/Spouse.htm

Nature of Benefit:

- DIC is a monthly benefit paid to a member's survivors when cause of death is attributable to an injury or disease incurred while on active duty. DIC is also paid to a member's survivors when death was not from a service-connected condition **if** the member had been rated **by the VA** as 100% disabled for 10 continuous years before death (or 5 continuous years since release from active duty).

- DIC can be paid to a surviving spouse, children, or parents. The DIC amount depends on the survivor's relationship to the deceased. DIC is a flat rate, established annually, to a surviving spouse. An additional amount is paid if there are dependent children being cared for by the surviving spouse, or if the member was rated by the VA as 100% disabled for at least 8 years preceding death.

- If the VA awards DIC to the surviving spouse and the spouse is also eligible for a Coast Guard SBP annuity, the spouse forfeits an amount equal to the DIC from his/her SBP annuity. The surviving spouse will receive a refund of SBP costs based on the difference between the SBP costs actually paid by the retiree, and the SBP costs that would have been incurred in order to provide the annuity payable after the DIC reduction. **The SBP cost refund is only given if the surviving spouse makes claim with the VA for DIC within 1 year after the retiree's death.**

  - DIC is a tax-free benefit.

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Federal Benefits, Continued

VA Non-Service Connected Death Pension

Who to Contact: Department of Veterans Affairs (VA). 1-800-827-1000

Nature of Benefit:

Surviving spouses and/or children may qualify for this benefit. To be eligible, the veteran must have served for at least 90 days during wartime and must have been permanently and totally disabled from a disability not related to service. The survivor must also meet certain income guidelines established by the VA.

Social Security Lump Sum Death Payment

Who to Contact: Social Security Administration. 1-800-772-1213
www.ssa.gov

Nature of Benefit:

A lump sum death payment is payable by Social Security to eligible survivors. Only one payment per family is authorized.

Social Security Survivor Benefits

Who to Contact: Social Security Administration. 1-800-772-1213
www.ssa.gov

Nature of benefit:

Monthly social security survivor benefits can be paid to a surviving spouse who is 60 years of age or older, 50 or older and disabled, or at any age if the spouse has a dependent child. If there is no surviving spouse, social security survivor benefits can also be paid to a dependent child or dependent parent. Contact your local Social Security office for details.

Continued on next page

Federal Benefits, Continued

Veterans Group Life Insurance (VGLI)

Who to Contact:

OFFICE OF SERVICEMEMBER'S GROUP LIFE INSURANCE (OSGLI)
290 W MT PLEASANT AVE
LIVINGSTON NJ 07039-2747
☎1 800 419-1473

Nature of Benefit:

Retirees have the option of converting their Servicemembers' Group Life Insurance (SGLI) to Veterans Group Life Insurance (VGLI) upon retirement. If the retiree had VGLI coverage, call the phone number shown above.
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VA Life Insurance Programs

Who to Contact: Department of Veterans Affairs (VA), 1 800 669-8477.

Nature of Benefit:

The VA has administered numerous life insurance programs since 1919, including:

- U.S. Government (USGLI)
- National Service (NSLI)
- Veterans Special (VSLI)
- Service Disabilities (SDVI)
- Veterans Reopened (VRI)
- Veterans Mortgage (VMLI)

If the deceased had coverage under any of these programs, the survivors need to call the VA at the above toll free number.

Continued on next page

Federal Benefits, Continued

Medical Care At Uniformed Facilities

Who to Contact: Local military medical facility.

Nature of Benefit:

Medical care for surviving dependents of deceased retired Coast Guard and NOAA personnel may be provided in medical facilities of the Uniformed Services, subject to the availability of space, facilities and the capabilities of the professional staff.

VA Dependents Educational Assistance

Who to Contact: Department of Veterans Affairs (VA). 1-800-827-1000

Nature of benefit:

If a retiree dies of a service-connected disability, the deceased retiree's child (age 18-26) or spouse may be eligible for dependents educational assistance. Contact the VA for details.

Health Insurance and Health Care through TRICARE

TRICARE is the Department of Defense's worldwide health care program (covers hospitalization, medical and pharmacy) available to retirees, spouses, dependents and survivors. The U.S. Coast Guard, U.S. Public Health Service Commissioned Corps, and the National Oceanic and Atmospheric Administration participate in this program.

The retiree (sponsor) will have enrolled your family in one or more of the TRICARE programs. It is important to determine which programs you are enrolled in to ensure continuity of coverage. These choices may change depending on your location, age, status and eligibility for different program options. Use the chart below to determine your available options. Your options may change when you move or when you become entitled to Medicare. When a retiree or surviving spouse or dependent becomes entitled to Medicare Part A, TRICARE supplements Medicare, with TRICARE for Life (TFL) as the secondary coverage.

Continued on next page

Federal Benefits, Continued

Health Insurance and Health Care through TRICARE (Continued)

Details for each program option can be found at the TRICARE website at http://www.tricare.mil/ or by calling a TRICARE regional office, the Coast Guard Health Benefits Advisor or visiting the TRICARE help desk at a local Military Treatment Facility.

For assistance with health care coverage when moving or traveling, contact your regional TRICARE contractor or primary care physician if enrolled in TRICARE Prime.

Beneficiary Type	Program Options
Retired service members and eligible family members, survivors, Medal of Honor recipients, qualified former spouses, and others	**TRICARE Prime** (requires an annual enrollment fee) • A designated Military Treatment Facility (MTF) • At civilian providers contracted by the Managed Care Support Contractor • US Family Health Plan (at several regional civilian hospitals) **TRICARE Standard / Extra** (No annual fee, but annual deductible and co-payments of 20-25%) **TRICARE for Life** (Enrollment in Medicare Parts A and B. If entitled to premium-free Medicare Part A based on age, disability, or end-stage renal disease, the beneficiary must have Medicare Part B to keep TRICARE eligibility.)

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Federal Benefits, Continued

Health Insurance and Health Care through TRICARE (Continued)

Beneficiary Type	Program Options
Retired Reserve service members and their family members.	If a reserve member dies under age 60, his family members become eligible for military benefits on the date the deceased would have reached age 60. TRICARE Retired Reserve (members of the Retired Reserve under age 60 – monthly premiums required) TRICARE Retiree Dental Program (requires monthly premiums based on zip code of residence)

Supplemental Insurance Plans for those enrolled in TRICARE Standard

By law, TRICARE is always the final payer of any health insurance claim. One exception is TRICARE Supplemental insurance. TRICARE supplements are offered by some military –related organizations and other insurers. These supplements indemnify beneficiaries from the cost of co-payments and sometimes excess charges. The supplements require monthly premiums and have annual deductibles of their own. A call to the carrier will confirm supplemental coverage. Have the insurance certificate # or the military retiree's Social Security number available.

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Federal Benefits, Continued

TRICARE Contractors Contacts

Information on each TRICARE Program Option is at http://www.tricare.mil/ and the following telephone numbers:

East Region: 1 800 444-5445
West Region: 1 844 866-9378
TRICARE Overseas: 1 888 777-8343
TRICARE for Life: 1 866 773-0404

The Coast Guard also has a dedicated **Health Benefits Advisor**, telephone # 1 800 942-2422 or (1-800-9HBA-HBA)

Retiree Dental & Vision Program

Eligibility for the Federal Employees Dental and Vision Insurance Program (FEDVIP), offered by the U.S. Office of Personnel Management (OPM), expanded to include certain retired uniformed service members, active duty family members, and survivors during in 2019.

BENEFEDS is the government-authorized and OPM-sponsored enrollment portal that eligible participants use to enroll in and manage their FEDVIP coverage. BENEFEDS also manages the billing systems and customer service functions necessary for the collection of FEDVIP premiums.

FEDVIP is a voluntary, enrollee-pay-all dental and vision program available to Federal employees and annuitants and certain uniformed service members. It is sponsored by the U.S. Office of Personnel Management (OPM) and offers eligible participants a choice between ten dental and four vision carriers.

Call 1-877-888-FEDS (1-877-888-3337) or visit https://www.benefeds.com to learn more.

DEERS

The Defense Eligibility Enrollment Reporting System (DEERS) controls access to military health care for service members and their dependents. DEERS oversees the issue of service member and family member medical access cards. These are the same as the military identification (ID) cards issued to each retiree and dependents, including spouses. Coast Guard data is contained in the DEERS system.

Continued on next page

Federal Benefits, Continued

DEERS (Continued)

DEERS maintains personnel and benefits information for:

- Active, retired, and reserve uniformed service personnel
- Eligible family members of active, retired, and reserve uniformed service personnel
- DoD civil service personnel
- DoD contractors requiring logical access

DEERS is also responsible for producing DoD ID Cards (RAPIDS and Common Access Cards). DEERS supports benefit delivery including medical, dental, educational, and life insurance. In addition, DEERS enables DoD e-business, including identity management, and reduces fraud and abuse of government benefits and supports force health protection and medical readiness.

ID Cards

DEERS issued ID cards are generally required to access health care and other military benefits. ID cards must be up to date to allow medical claims to process.

Military retirees' ID cards are issued without expiration date. However, the retiree should get a new ID card at age 65, or when enrolling in Medicare Part B. The card will be modified to indicate that civilian health coverage can be continued beyond age 65.

Military spouses and eligible family members must renew their ID cards every four years. Spouses that reach age 75 will be issued a permanent ID card. Spouses or other dependents that reach age 65 or otherwise become entitled to Medicare should get a new ID card.

Surviving spouses must get a new ID card soon after the death of their military sponsor.

Note that a current and valid ID card is essential to ensuring continuity of retiree survivor benefits, including health care.

Continued on next page

Federal Benefits, Continued

RAPIDS

The Real-time Automated Personnel Identification System (RAPIDS) application provides on-line access to information in the DEERS database. Over 900 RAPIDS sites in 23 different countries use DEERS data to provide ID cards or related personnel support to eligible persons. RAPIDS can be accessed online at this site: http://www.dmdc.osd.mil/rsl/appj/site?execution=e1s1. Information on where ID cards may be obtained or reissued can be found at this website or by contacting any military installation.

The site lists the name, address, contact information, distance from zip code and other dates regarding the issuance of military ID Cards at that location. The site also contains useful information concerning documentation required to obtain a military ID card, contact information and other helpful links.

Common Questions Asked After Death of a Retiree

Introduction

Listed below are some of the more common questions we receive from survivors after the death of a retiree. If you need more information or assistance please feel free to give us a call at this toll-free number:

☎1 866 772-8724

Questions and answers

Q My spouse died on 20 September. Can I keep his retired paycheck dated 1 October?

A No, this check is for 30 days and your spouse lived only 20 days of the month. You need to return the 1 October payment to PPC (RAS). RAS will issue a special payment for 1-20 September to whomever your spouse designated to receive final retired pay.

Q Will the Coast Guard pay any money for the burial of a retiree?

A No. The Social Security Administration, Department of Veterans Affairs and life insurance policies pay certain burial benefits.

Q Why do I have to submit a claim for final retired pay due when PPC stopped my spouse's pay based upon a telephone report of death?

A A review of the claim and death certificate is conducted to ensure the correct amount of final retired pay is paid to the beneficiary. If a retiree dies around midnight, there may be a difference of one day's pay when compared to the telephone report of death.

Continued on next page

Common Questions Asked After Death of a Retiree, Continued

Questions and answers (continued)

Q My spouse retired from Civil Service. Where do I submit my claim for benefits?

A You should submit a letter applying for all benefits. Please include the retiree's civil service claim number (it usually begins with ***CSA***). Attach a copy of your spouse's death certificate and mail to:

CORRESPONDENCE & DEATH CLAIMS BRANCH
RETIREMENT OPERATIONS CTR
PO BOX 45
BOYERS PA 16020
☎ 1-888-767-6738

Q My spouse received money from the Social Security Administration and the Department of Veterans Affairs. Will PPC notify these agencies of my spouse's death?

A No, it is the responsibility of the family to notify these agencies. The funeral home handling the burial arrangements may notify these agencies for you.

Q Will the Coast Guard pay for transportation of family members to attend the funeral services?

A No, it is the responsibility of attendees to pay for their own transportation.

Q Will the Coast Guard provide military honors at my spouse's funeral service?

A Yes. All Services are required by law to provide Military Funeral Honors (MFH) at the funeral of a veteran, if requested by the family. The Funeral Director arranges for the MFH. The Funeral Director will make arrangements for two uniformed members, one of whom shall be a member of the veteran's parent service of the Armed Forces, to attend the funeral. These personnel will also fold an American flag and present the flag to the family with the Service's condolences. MFH also includes the playing of Taps either with a bugler or a CD.

Applying for Final Retired Pay Due

Beneficiaries

When a retired member dies, retired pay due through the date of death is paid in this order of precedence:

a. Beneficiary designated by the member in writing. The beneficiary form must be received by the Coast Guard prior to the member's death.

b. Surviving spouse.

c. Children and their descendants, by representation.

d. Father and mother in equal parts or, if either is deceased, the survivor.

e. Legal representative.

f. Person entitled under the law of the domicile of the retiree.

g. Person paying the funeral expenses.

Required Documentation

You must provide the following documentation to apply for final pay due.

- A completed CG Form 3867 (see next page). Two witnesses must sign and date the form when the applicant signs with an "X". If you are claiming final retired pay as executor, or payer of the funeral bill, you must provide the supporting documentation as requested on the form.
- **Copy of death certificate.** Note: Death certificate must state cause of death.

Filing Application

Send completed form to:

COMMANDING OFFICER (RAS)
U. S. Coast Guard
Pay & Personnel Center
444 SE QUINCY ST
TOPEKA KS 66683-3591

Payment

You can expect to receive your payment for final retired pay due within 45 days after we receive the claim form and supporting documents.

Department of Homeland Security U. S. Coast Guard CG PPC-3867 (03/03)	**CLAIM FOR FINAL RETIRED PAY**	
1. Name, Rank, and Social Security Number of Deceased Retiree	2. Date of Retiree's Death	3. Date of Claim

•4. By signature below, I certify that all statements on this claim are true to the best of my knowledge, information and belief. I certify that no evidence to the settlement of this claim has been suppressed or withheld. I understand that any false statement on this claim, or any misrepresentation relative thereto, is a violation of the law punishable by fine of not more than $10,000 or imprisonment of not more than 10 years or both (32 Statute 197; 18 U.S.C. 10).

•IF SUBMITTING THIS CLAIM AS A SURVIVING SPOUSE I certify that I was married to the deceased at the time of death. Such marriage had not been dissolved prior to his/her death.

•IF SUBMITTING THIS CLAIM AS LEGAL REPRESENTATIVE/EXECUTOR/ADMINISTRATOR I certify that I have been duly appointed in this capacity and such appointment is still in full force and effect. A court certificate evidencing my appointment is attached.

•IF SUBMITTING THIS CLAIM AS THE PERSON PAYING THE FUNERAL EXPENSES I have attached a copy of the funeral bill.

Name and Social Security Number	**Age**	**Relationship to Deceased**	**Address and Telephone Number**	**Signature**
			( )	
			( )	
			( )	
			( )	

An application signed with an "X" must be witnessed (by two disinterested persons) or notarized or countersigned by the person holding power of attorney. A copy of the power of attorney and explanation why the applicant required assistance must also be submitted.

SIGNATURE OF WITNESS	SIGNATURE OF WITNESS
ADDRESS	ADDRESS
( ) TELEPHONE NUMBER	( ) TELEPHONE NUMBER
DATE	DATE

PRIVACY ACT STATEMENT

1. AUTHORITY: 10 U.S.C. Section 2771.
2. PURPOSE/USE: To allow eligible claimants to apply for arrears of retired pay.
3. DISCLOSURE: Disclosure of this information is voluntary, but without disclosure, a beneficiary may not receive the final pay due the deceased retiree.

Instructions for Completing Application for Annuity (CG-1884)

Part A	Self-explanatory.
Part B	Numbers 4, 5, 6 and 7. Self-explanatory. Number 8. Any correspondence (i.e. tax forms, annual certifications, etc.) and the Retiree Newsletter will be sent to the address you provide in this box. Number 9. Self-explanatory. Number 10. To be completed by current spouse. Number 11. To be completed by former spouse, if applicable.. Number 12. If you are receiving a survivor annuity from a deceased retiree from any branch of the armed forces, you are not eligible for an annuity from a Coast Guard retiree.
Part C	If a child is a minor or an incapacitated child, provide custodian information.
Part D	Self-explanatory.
Part E	If information required is not known, contact your financial institution.
Part F	**Federal Income Tax Withholding (FITW**). You may change your elected withholding, or elect no withholding, at any time by submitting an IRS Form W-4P. **State Income Tax Withholding**. Although most states consider annuities as taxable income, we **cannot** withhold state income tax from annuities.
Part G	An annuitant whose application is signed with an "X" must be witnessed (two disinterested persons) or notarized or countersigned by the person holding power of attorney. A copy of the power of attorney and explanation why the annuitant required assistance must be submitted.
Questions	If you have any questions or concerns please call your pay technician at 1-866-772-8724.

DEPARTMENT OF HOMELAND SECURITY

U.S. Coast Guard

APPLICATION FOR ANNUITY UNDER THE SURVIVOR BENEFIT PLAN (SBP), RESERVE COMPONENT SURVIVOR BENEFIT PLAN (RCSBP), RETIRED SERVICEMAN'S FAMILY PROTECTION PLAN (RSFPP) and/or FINAL RETIRED PAY DUE

PRIVACY ACT STATEMENT

Any "collection of information" as defined in the Paperwork Reduction Act of 1995 (codified at 44 U.S.C. 3501 et seq) on this form has not been approved by the Director of the Office of Management and Budget (OMB) and does not display a valid control number assigned by the Director. Therefore, no person shall be subject to any penalty for failing to comply with any such collection of information.

Authority: Collection of this information is authorized by: 10 U.S.C. Chapters 73 and 165; DOD Financial Management Regulation, Volume 7B, Chapters 30, 37, 49, and 54; and E.O. 9397.

Purpose: The Coast Guard Pay & Personnel Center will use this information to verify eligibility of a surviving spouse, dependent child, former spouse, or natural person with an insurable interest for an annuity under the Survivor Benefit Plan (SBP) and/or Retired Servicemans Family Protection Plan (RSFPP). The information will also be used to verify eligibility for final retired pay arrears due a deceased Coast Guard, PHS, or NOAA member.

Routine Uses: The information will be used by the Coast Guard Pay & Personnel Center to establish a survivor annuity account. The information may be shared with the Internal Revenue Service for tax purposes, and with the Department of Veterans Affairs in conjunction with administration of DVA compensation.

Disclosure: Disclosure of this information (including your SSN) is voluntary; however, failure to furnish the requested information will delay payment of annuities and final pay arrears.

PART – INFORMATION ABOUT THE DECEASED MEMBER

1. Name *(Last, First, Middle Initial)*	2. Employee ID Number	3. Date of Death

PART B – SURVIVING SPOUSE/FORMER SPOUSE, INSURABLE INTEREST INFORMATION

4. Name *(Last, First, Middle Initial)*	5. Social Security Number	6. Date of Birth

7. Area Code and Telephone Number	8. Correspondence Mailing Address *(including zip/postal code)*	9. What is your country of citizenship?

10. Were you legally married to the deceased at the time of death?	☐ Yes	☐ No
10a. *If yes, provide,* Place of Marriage:	10b. Date of Marriage:	
11. If former spouse, have you remarried? *(If yes, provide place and date of remarriage)*	☐ Yes	☐ No
11a. Place of Remarriage:	11b. Date of Remarriage:	
12. Are you receiving a survivor annuity on behalf of any other deceased military member? *(If yes, provide deceased member's name, social security number, branch of service and monthly amount below)*	☐ Yes	☐ No

12a. Name of Deceased Member	12b. Social Security Number	12c. Branch of Service	12d. Amount

PART C – ELIGIBLE CHILDREN OF THE DECEASED UNDER THE AGE OF 23 OR INCAPABLE OF SELF-SUPPORT

13a. Name		13f. Name, Address, Relationship and Telephone Number of Custodian	
13b. Social Security Number	13c. Date of Birth		
13d. Marital Status	13e. Full-Time Student? ☐ Yes ☐ No	Relationship	Telephone
14a. Name		14f. Name, Address, Relationship and Telephone Number of Custodian	
14b. Social Security Number	14c. Date of Birth		
14d. Marital Status	14e. Full-Time Student? ☐ Yes ☐ No	Relationship	Telephone
15a. Name		15f. Name, Address, Relationship and Telephone Number of Custodian	
15b. Social Security Number	15c. Date of Birth		
15d. Marital Status	15e. Full-Time Student? ☐ Yes ☐ No	Relationship	Telephone

PART D – GUARDIAN INFORMATION

16. Has a guardian been appointed by a court for any of the named survivors in Part B or C? ***If yes, provide a copy of the court order.***	☐ **Yes**	☐ **No**

PART E – DIRECT DEPOSIT INFORMATION

17a. ☐ Continue direct deposit to the same account used for member's retired pay. *(Continue to Part F)*

17b. ☐ Direct deposit account shown below. *(Complete blocks 18 through 19b or attach a blank voided check)*

18. Type of Account: ☐ Checking ☐ Savings

19a. Routing Transit Number: ☐☐☐☐☐☐☐☐ ☐ Check Digit

19b. Account Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

PART F – FEDERAL INCOME TAX WITHHOLDING INFORMATION

20. ☐ I do not want any federal tax withheld from my annuity. *(Continue to Part G)*

21. Marital Status *(check one)*: ☐ **Single,** ☐ **Married** or ☐ **Married but withhold at higher single rate**

22. Total No. of Exemptions Claimed: _____	23. Additional Withholding *(optional)*: $ _____

PART G – AFFIDAVIT AND SIGNATURE

24. I certify that all statements on this claim are true to the best of my knowledge, information, and belief. I certify that no evidence to the settlement of this claim has been suppressed or withheld. I understand that any false statement on this claim, or any misrepresentation relative thereto, is a violation of the law punishable by a fine of not more than $10,000 or imprisonment of not more than 10 years or both (32 Stat. 197; 18 U.S.C. 10).

I understand under the law, I cannot receive both a CG, PHS, or NOAA Annuity and Dependency & Indemnity Compensation (DIC) in full amounts from the same retiree. I am only entitled to the amount of the CG, PHS, or NOAA annuity that exceeds the DIC spouse payment. If any overpayments of CG, PHS, or NOAA benefits occur, I authorize the Department of Veteran Affairs to repay the Coast Guard, PHS, or NOAA the Amount of the overpayment from the DIC payments to which I may become entitled.

24a. Date	24b. Signature of Applicant

WITNESSES REQUIRED ONLY IF SIGNATURE OF APPLICANT IS MADE BY "X" MARK ABOVE.

An annuitant whose application is signed with an "X" must be witnessed (by two disinterested persons) or notarized or countersigned by the person holding power of attorney. A copy of the power of attorney and explanation why the annuitant required assistance must also be submitted

25. *(PRINT)* Witness Name *(Last, First, MI)*	25a. Witness Signature	
25b. Witness Address *(Street, City, State and Zip Code)*	25c. Witness Telephone Number	25d. Date
26. *(PRINT)* Witness Name *(Last, First, MI)*	26a. Witness Signature	
26b. Witness Address *(Street, City, State and Zip Code)*	26c. Witness Telephone Number	26d. Date