



# Contractor or Third-Party Worker Retirement Status Verification

This form is for employers to use to verify the retirement status of a worker paid through accounts payable or a third party.

Contact Information for  
DRS Employer Support Services  
360.664.7200, option 2  
800.547.6657, option 6, option 2  
[drs.employersupport@drs.wa.gov](mailto:drs.employersupport@drs.wa.gov)

## Employer Information

Failure to report a retiree to DRS can result in a significant liability to the employer for pension overpayments.

Some workers are considered to be employees of both your agency and the third party (dual employers). A retiree who is in an employee/employer relationship with your agency is subject to the same retiree-return-to-work (RRTW) rules as an employee paid through payroll.

Additionally, workers under age 65 who retired using the 2008 Early Retirement Factors (ERF) are subject to stricter return-to-work rules and cannot perform services in any capacity for a DRS-covered employer and continue to receive a benefit (see [WAC 415-02-325](#)).

## Employer Instructions

- Use the Employer Reporting Application (ERA) to review the worker’s retirement status.
- Did the worker retire from a DRS-covered plan?  Yes  No  
**If yes and in an employee/employer relationship with your agency, report using RRTW rules.**
- Did the worker retire using the 2008 ERF?  Yes  No  
**If yes, contact Employer Support Services (ESS) immediately.**
- Sign and date this form.
- Retain this form for three years beyond your relationship with the worker.

## Worker Information

Worker Name (Last, First, Middle)	Social Security Number
If your agency doesn't directly pay the worker, name the company or contractor paying the worker.	
Identify the Type of Worker (Check Only One)	
<input type="checkbox"/> Employee hired through a third party (staffing agency, temp agency, etc.)	
<input type="checkbox"/> Independent contractor	
<input type="checkbox"/> Worker provided by company or contractor my agency hired to perform services	

## Employer Signature

I have verified the information above using ERA or by contacting a DRS representative. I acknowledge that failure to properly report a 2008 ERF retiree to DRS can result in a liability to the employer.	
Employer Signature	Date

