



## ERROR CORRECTION (FORM RP-6)

PLEASE READ INSTRUCTIONS CAREFULLY

THIS ERROR CORRECTION FORM MUST BE COMPLETED  
WITH YOUR LOCAL NAF HUMAN RESOURCES OFFICE

THIS ERROR CORRECTION FORM WILL BE USED TO CORRECT INVALID DATA DIRECTLY  
RELATED TO A PARTICIPANTS RETIREMENT CALCULATION. OFFICIAL SUPPORTING  
DOCUMENTATION MUST ACCOMPANY EACH CORRECTION

**\*\*NOTE:** IF ADDITIONAL INFORMATION OR CLARIFICATION IS NEEDED PLEASE CONTACT  
THE RETIREMENT RESOURCE TEAM: [mill\\_cnic\\_retirement@navy.mil](mailto:mill_cnic_retirement@navy.mil)

### APPLICATION INSTRUCTIONS

1. Please type or use blue or black ink.
2. Please **PRINT** clearly.
3. Complete all areas of this error correction form.
4. Ensure ALL selections are clearly marked with an "X"
5. Ensure required "*Signatures*" and contact information is provided.
6. Return to local NAF HR Office for completion and mailing.

Send error correction request and all required documentation to:

Email: [mill\\_cnic\\_retirement@navy.mil](mailto:mill_cnic_retirement@navy.mil)  
Fax: (901) 874-6844  
Mail: Retirement Resource Team (N94R)  
Commander, Navy Installations Command  
5720 Integrity Drive  
Building 457  
Millington, TN 38055-6540



**COMMANDER, NAVY INSTALLATIONS COMMAND  
NON-APPROPRIATED FUND RETIREMENT PLAN  
ERROR CORRECTION**

**SECTION I: GENERAL INFORMATION**

*-Complete by local NAF HR Office-*

Employee Name: \_\_\_\_\_  
(Last) (First) (MI)

Corrected Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I believe the following information to be incorrect and have provided documentation that supports these changes (Clearly mark selection with an "X"):

- |   |  |
|---|--|
| <input type="checkbox"/> Name                   | <input type="checkbox"/> Address*            |
| <input type="checkbox"/> Date of Hire           | <input type="checkbox"/> Date of Birth       |
| <input type="checkbox"/> Date of Enrollment     | <input type="checkbox"/> Break(s) in Service |
| <input type="checkbox"/> Total Credited Service | <input type="checkbox"/> Total Contributions |

*\*Please note that address changes can be submitted by completing the "Corrected Address" section above. No additional documentation is required.*

Brief Description of Error (Please Print):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## **SECTION II: ACCEPTABLE FORMS OF IDENTIFYING DOCUMENTATION**

*-Complete by local NAF HR Office-*

Acceptable forms of identifying documentation include, but are not limited to, the following:

- Marriage Certificate
- Divorce Decree
- Court Order Authorizing Name Change
- Change of Name Affidavit
- Certified Copy of Birth Certificate
- Naturalization Paperwork
- Passport
- Offer Letter stating Original Hire Date
- Personal Action Report
- Enrollment Application

All submitted data change requests and accompanying documentation will be reviewed. Results of review will be directed to the local NAF HR Office.

Return to: Retirement Resource Team (N94R)  
Commander, Navy Installations Command  
5720 Integrity Drive  
Building 457  
Millington, TN 38055-6520