

# Senior's Pension Benefit request form

Retiree					
Registration number:			Policy number:		
Surname:					
Maiden name:					
First name:			Middle name(s):		
Sex:	<input type="checkbox"/> Male		<input type="checkbox"/> Female		
Address					
Street name & nr:			City/District:		
Postal code:			Country:		
Telephone:					
e-mail:					
ID number:					
Date of birth:	..... / ..... / .....	Place of birth:			
Marital status:	<input type="checkbox"/> Single		<input type="checkbox"/> Married		<input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
Current spouse (only if married)					
Surname:					
Maiden name:					
First name:			Middle name(s):		
Address					
Street name & nr:			City/District:		
Postal code:			Country:		
Sex:	<input type="checkbox"/> Male		<input type="checkbox"/> Female		
ID number:					
Date of birth:	..... / ..... / .....	Place of birth:			
Marriage date:	..... / ..... / .....				
Dependents <sup>1</sup>					
1.	Surname:				
	First name:		Middle name(s):		
	Date of birth:	..... / ..... / .....	Place of birth:		
2.	Surname:				
	First name:		Middle name(s):		
	Date of birth:	..... / ..... / .....	Place of birth:		
3.	Surname:				
	First name:		Middle name(s):		
	Date of birth:	..... / ..... / .....	Place of birth:		
4.	Surname:				
	First name:		Middle name(s):		
	Date of birth:	..... / ..... / .....	Place of birth:		

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Ex-spouse(s) (only if divorced or re-married)			
1.	Surname:		Maiden name:
	First name:		Middle name(s):
	Date of birth:	..... / ..... / .....	Place of birth:
	<b>Address</b>		
	Street name & nr:		City/District:
	Postal code:		Country:
	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
	ID number:		
	Date of divorce:	..... / ..... / ..... → provide copy of divorce decree	
	2.	Surname:	
First name:			Middle name(s):
Date of birth:		..... / ..... / .....	Place of birth:
<b>Address</b>			
Street name & nr:			City/District:
Postal code:			Country:
Sex:		<input type="checkbox"/> Male <input type="checkbox"/> Female	
ID number:			
Date of divorce:		..... / ..... / ..... → provide copy of divorce decree	

Employment details			
Current employer:			
Retirement / Resignation date:		..... / ..... / .....	
Have you ever been awarded a leave of absence for one or more of the following reasons?	<input type="checkbox"/> Study leave	From: ..... / ..... / ..... Until: ..... / ..... / .....	→ provide "besluit" substantiating leave of absence
	<input type="checkbox"/> Suspension	From: ..... / ..... / ..... Until: ..... / ..... / .....	
	<input type="checkbox"/> Hold political office	From: ..... / ..... / ..... Until: ..... / ..... / .....	
	<input type="checkbox"/> Military service	From: ..... / ..... / ..... Until: ..... / ..... / .....	
	<input type="checkbox"/> Other, .....	From: ..... / ..... / ..... Until: ..... / ..... / .....	
	<input type="checkbox"/> No		
Have you ever received "wachtgeld"?		<input type="checkbox"/> Yes → provide copy of "wachtgeldbesluit" <input type="checkbox"/> No	

<sup>1</sup>Dependents are classified as children who are

- younger than the age of 21 years and financially dependent on you;
- between the ages of 21 and 25, attending school and financially dependent on you;
- between the ages of 21 and 25, financially dependent on you, physically or mentally disabled and earning less than 1/3 of the income of able-bodied someone in the same age bracket.

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Bank details			
Bank name:			
Bank address			
Street name & nr:		City/District:	
Postal code:		Country:	
Bank account number:			
Currency	<input type="checkbox"/> NAF	<input type="checkbox"/> USD	<input type="checkbox"/> EURO <input type="checkbox"/> Other: _____
BIC /IBAN number:			
Account type:	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Beneficiary name:			

**Note: This must be an active bank account.**

- I wish to receive my monthly pay slips via the above mentioned email address.
- I hereby attest that all information that I have provided on this form is true and correct and understand that it will be used in determining my eligibility to pension benefits from Algemeen Pensioenfonds Sint Maarten (APS).

**I also understand that I am obliged to inform APS of any relevant changes in my personal situation, such as divorce, change of bank account etc.**

Submission date: ..... / ..... / .....

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

Name (in print) \_\_\_\_\_

Please ensure that the documents substantiating your pension request are submitted with this form.

- Copy of valid picture ID (passport, ID card, driver's license)
- Extract from Civil Registry ("Uitgebreid uittreksel Burgerzaken")
- Salary specification letter from your last employer (s) stating the salary amounts earned over the three years prior to your retirement and confirming your employment history
- "Ontslagbesluit" / Termination letter
- Copy of Bank statement/book (for verification purposes)
- Copy of divorce decree(s) (if applicable)
- Copy of "wachtgeldbesluit" (if applicable)
- Copy of decree substantiating any leave of absence that was awarded / "vrijstelling van dienst besluit" (if applicable)