

Widow(er)'s /Orphan's Pension Benefit request form

Submitter			
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:	
Type pension requested: <input type="checkbox"/> Widow(er)'s pension <input type="checkbox"/> Orphan's pension			
Details on person from whom rights are derived			
<input type="checkbox"/> Participant		<input type="checkbox"/> Pensioner	
Registration number:	Policy number:		
Surname:			
Maiden name:			
First name:		Middle name(s):	
Born on: / /	Deceased as of: / /
Bank details			
Bank name:			
Bank address			
Street name & nr:		City/District:	
Postal code:		Country:	
Bank account nr:			
Currency	<input type="checkbox"/> NAF <input type="checkbox"/> USD <input type="checkbox"/> EURO <input type="checkbox"/> Other: _____		
BIC /IBAN nr:			
Account type:	<input type="checkbox"/> Checking		<input type="checkbox"/> Savings
Beneficiary name:			

Note: This must be an active bank account.

Note: If the orphan is still a minor, this form must be completed and signed by his /her parent or legal guardian. Pension benefits payment will be made to a bank account held in the name of the parent and /or legal guardian.
 If the orphan does not have his /her own bank account, an authorized beneficiary must be named.

I wish to receive my monthly pay slips via the above mentioned email address.

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- 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 marriage, change of bank account, no longer attending school 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")
- Death certificate of the deceased family member from whom pension benefits rights are derived
- Salary specification letter from deceased participant's last employer stating the salary amounts earned over the last three years (if applicable)
- Declaration of school attendance for orphans if between the ages of 21 and 25 years
- Copy of bank statement/book (for verification purposes)

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