

ORIGINAL ~ PLEASE SEND BACK

Information regarding social benefits and income from employment

Information regarding social benefits, income from employment and professional career

National number: **00.00.00-000.00**

1 Social benefits and income from employment

Do you qualify for an allowance paid for by Belgium or another country owing to illness, disability or unemployment, early retirement, a career break, or a reduction in working hours?

No Yes

~ Type of benefit:

~ Starting date:

~ Gross monthly amount on **dd.mm.jjjj**:

~ Name and address of the payment body:

.....

Do you qualify for one or more retirement pensions paid for by Belgium?

No Yes

~ Starting date:

~ Gross monthly amount on **dd.mm.jjjj**:

~ Pension reference number:

~ Name and address of the payment body:

.....

Do you qualify for one or more retirement pensions paid for by a country apart from Belgium?

No Yes

~ Starting date:

~ Gross monthly amount on **dd.mm.jjjj** (please enclose evidence):

~ Pension reference number:

~ Name and address of the payment body:

.....

Do you qualify for one or more survivor's pensions paid for by Belgium?

No Yes

~ Starting date:

~ Gross monthly amount on **dd.mm.jjjj**:

~ Pension reference number:

~ Name and address of the payment body:

.....

Do you qualify for one or more survivor's pensions paid for by a country apart from Belgium?

No Yes

~ Starting date:

~ Gross monthly amount on **dd.mm.jjjj** (please enclose evidence):

~ Pension reference number:

~ Name and address of the payment body:

Are you continuing to exercise a professional activity? No Yes
 When did or will this activity cease?

Have you fulfilled any military service in Belgium? No Yes
 From to (day month year)
 From to (day month year)

Did your deceased spouse fulfil any military service in Belgium? No Yes
 From to (day month year)
 From to (day month year)

In order to enable the National Pensions Office to determine the principal office of the industrial tribunal that applies in the event of an appeal, please add the following information: (Voor RP en OLP)
 ~ the location of last domicile or last residence in Belgium:

 ~ or the location of last employment in Belgium:

2 Social benefits and income from employment of your spouse

Surname name:

Date of birth:

Does your spouse qualify for an allowance paid for by Belgium or another country owing to illness, disability or unemployment, early retirement, a career break, or a reduction in working hours? No Yes

~ Type of benefit:

~ Starting date:

~ Gross monthly amount on dd.mm.jjjj:

~ Name and address of the payment body:

.....

Does your spouse qualify for one or more retirement pensions paid for by Belgium? No Yes

~ Starting date:

~ Gross monthly amount on dd.mm.jjjj:

~ Pension reference number:

~ Name and address of the payment body:

.....

Does your spouse qualify for one or more retirement pensions paid for by a country apart from Belgium? No Yes

~ Starting date:

~ Gross monthly amount on dd.mm.jjjj (please enclose evidence):

~ Pension reference number:

~ Name and address of the payment body:

.....

Is your spouse continuing to exercise a professional activity? No Yes
 When did or will this activity cease?

3 The professional career of your deceased spouse in Belgium and outside Belgium
The professional career of your divorced spouse in Belgium and outside Belgium

Years	Capacity: employee, independent, appointed civil servant or on welfare	Place of employment	~ Name and address of employers ~ Name of unemployment insurance fund, health insurance fund or insurance company, that paid benefits or allowances during career breaks
Before 54
1955
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2011

4 Your professional career in Belgium and outside Belgium

Years	Capacity: employee, independent, appointed civil servant or on welfare	Place of employment	~ Name and address of employers ~ Name of unemployment insurance fund, health insurance fund or insurance company, that paid benefits or allowances during career breaks
Before 59
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5 Applicants declaration and undertaking

I declare that the foregoing is correct and complete. I know that any information provided may be verified with the relevant employers, public administrations and the bodies in charge of applying social security legislation.

I undertake to notify the National Pensions Office as soon as any change is made in the light of these declarations about:

- ~ my marital status;
 - ~ my address **and that of my spouse;**
 - ~ the exercise of any professional activity, mandate, responsibility or office **by my spouse and I;**
 - ~ **my spouse and I** qualifying for benefits owing to
 - illness, disability, involuntary unemployment pursuant to Belgian or non-Belgian social security legislation,
 - a similar benefit, pursuant to another Belgian or non-Belgian law
 - a benefit owing to a career break or a reduction in working hours,
 - early retirement;
 - ~ **my spouse and I** qualifying for any pension or benefit in lieu of, granted pursuant to a Belgian, non-Belgian or international pension scheme;
 - ~ my nationality;
- and to immediately notify the National Pensions Office if I no longer have dependent children.

I am aware that a failure to observe these requirements will result in the amounts wrongfully paid being recovered and that the period of limitation applied in the case of willful deception or fraud is 3 years.

Drawn up in (place): ; the (day month year)

Signature:

Name and surname:

Street and number:

Postal code PLACE:

COUNTRY:

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Statement concerning civil status

Concerning myself	Please use all capital letters	Concerning my spouse
.....	Surname (maiden name)	.....
.....	All first names	..........
.....	Nationality	.....
.....	Sex	.....
.....	Place and date of birth	.....
.....	Belgian social security number	.....
.....	Date of marriage	.....
.....	Place and date of decease (if relevant)	.....
.....	Date of separation (if relevant)	.....
.....	Date of divorce (if relevant)	.....
.....	Correct present address	...............
.....	Last known address in Belgium	...............

Drawn up in (place): ; the (day month year)

Signature of the applicant:

Seal of the Belgian Embassy or Consulate or any other competent authority¹: (compulsory)

¹ If your domicile is located too far away, please go to your local government offices, the police station or any other competent authority. You can also add a copy of your identity card or your passport.