



Contact information actuarial pensions : +32 2 509 59 63

Registration number :
actuariaal-pensioenen-osz@onssrszls.fgov.be

APPLICATION FOR A WIDOW'S PENSION AND ORPHAN'S ALLOWANCES

(to be sent back by registered letter or by e-mail)

A. Last name of the insured (*block letters*):
 First names: Nationality:
 Are you also insured with the NSSO? NO | YES : Registration number :
 Place and date of birth:
 Place and date of death:
 Belgian National Registry Number:

B. Maiden name of the widow (*block letters*):
 First names: Nationality:
 Place and date of birth:
 Place and date of marriage:
 Belgian National Registry Number:
 Address (mail) :

 E-mail :
 Telephone number: Number of dependent persons:

C. Information concerning the **ORPHANS** for whom the allowance is requested
 a) under 18 years of age;
 b) from 18 to 25 years of age if they continue their studies at an educational institution with a full-time course of study or if they have an apprenticeship contract recognized by the Ministry of Economic Affairs;
 c) without age limitation if the child is completely unable to exercise a profession because of his/her physical or mental condition and if he/she resides in Belgium.

| <u>Last name and first names of the children</u> | <u>Date of birth</u> | <u>Last name and first names of the children</u> | <u>Date of birth</u> |
|--|----------------------|--|----------------------|
| | | | |
| | | | |
| | | | |

I request payment:
 - of the widow's pension to which I am entitled
 - and of the orphan's allowances in favour of the children listed above.

With this application I attach the following items of evidence:
 1) a school certificate for children over 18;
 2) a legalized copy of the apprenticeship contract;
 3) the following documents :

I hereby confirm that the above mentioned information is correct.

Date:
 (signature)