

REGISTRATION FORM Partner's Pension

The undersigned, Name partner : Date of birth : Address : City/town : Name of participant : Date of birth : Date of decease : Taking into account: • that the adult partner has or had a joint household with the (former) participant; • that the adult partner is or has not been a first-degree blood relative*, a second-degree blood relative in the direct line of the participant; • that the adult partner is not an adult stepchild or an adult former foster child; declares that the following joint household is or has been:			
		they live at the same address and take ca After the decease of the participant or for signed by the partner in which the partner deceased and in which the partner makes relevant, at any time before the decease, In any case, the partner makes it plausible deceased employee or former employee is address for six months and one of the formula of the formula of the same address.	ormer participant, there is a cohabitation (former) participant in which they declare that re of each other. The participant, there is a cohabitation declaration r declares that he or she was a partner of the it plausible that at the time of the decease or, if he or she had a joint household with the deceased. The the or she has been registered at the same
		City/town:	Date:
		Signature of partner	Signature of participant (when deceased N/A)

*There is a blood relative if you have a common ancestor. It's not just about a biological ancestor. A person can also be a blood relative by adoption or acknowledgment. A first-degree relative is a father, mother or child. A relative in the second degree is a grandfather, grandmother or grandchild.