

Application form for extra increase single pensioners

Surname:

Place of residence:

Name:

Date of birth:

Address:

Telephone number:

Indicate for each number the living situation that is applicable to you:

1.

- I am not married
- I am a widow(er)
- I am married

2.

- I live in the Caribbean Netherlands for more than 5 years
- I live in the Caribbean Netherlands less than 5 years

3.

- I live alone
- I live with my (grand)children
- I live with my brother(s)/sister(s)
- I live with my partner

4.

- Besides my AOV pension I have no other income
- Besides my AOV pension I have no more than \$59 per month extra income
- Besides my AOV pension I have more than \$59 per month extra income

5.

- The current balance on my bank account is less than \$500
- The current balance on my bank account is more than \$500

6.

- I have no savings and/or valuable possessions (such as jewelry, a second car or a second house)
- I have no more than \$ 3000 in savings and/or valuable possessions
- I have more than \$ 3000 in savings and/or valuable possessions

I hereby declare to have truthfully answered all questions. I am aware that the RCN SZW unit will verify the relevant information in various ways. I understand that the extra increase can be reclaimed if it was based on incorrect or incomplete information.

Town:

Date:

Signature: