



# Application Compensation for relatives

## Caribbean Netherlands

Was a relative of yours victim of an intentional violent crime in the Caribbean Netherlands on or after 1 January 2019? And did this relative suffer serious and permanent injury as a result? In that case, you may be eligible to receive compensation from the Violent Offences Compensation Fund (Schadefonds Geweldsmisdrijven). You can use this form to submit an application for this compensation.

### Do you have any questions?

Please contact the Compensation Fund or visit [www.schadefondscn.com](http://www.schadefondscn.com).

T +31 70 414 20 00  
E [info@schadefonds.nl](mailto:info@schadefonds.nl)

### Do you need help completing the form?

Victim Assistance Office will be able to help you free of charge and can be reached at telephone number +599 717 6181 (Bonaire), +599 790 0426 (Sint Eustatius), +599 416 6917 (Saba) or through [slachtofferhulp@politiecn.com](mailto:slachtofferhulp@politiecn.com)

### Submit your application in 3 steps

1. Complete this form fully and truthfully. Read the explanation on page 5 carefully.
2. Enclose copies of your identity document and the evidence.
3. Send everything to:

**Schadefonds Geweldsmisdrijven**  
**Antwoordnummer 91052**  
**2509 VC Den Haag, The Netherlands**

Recognition gives strength Together involved

## 1A Relative

Fill in the details of the relative for whom the compensation is applied for.

► Please enclose (obligatory): a copy of the relative's identity document

A.1 What was your relation with the victim?  
I was his/her

parent    spouse    (registered) partner

child    sibling    other, namely

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gender

A.2 Surname  m  f

A.3 First name(s)

A.4 Date of birth

A.5 Identity number

A.6 Street and house number

A.7 (Postcode and) city/town

A.8 Country

Please do not write in this white space.

A.9 Telephone number(s)

A.10 Accessibility, during office hours (local time)

A.11 E-mail

A.12 Account number  [▶ Please enclose a copy of your bank card](#)

A.13 In the name of

A.14 BIC / SWIFT code

A.15 Bank's name

A.16 Bank location

When you fill in your telephone number or e-mail address, we assume that we can contact you in this way.

## 1B Legal representative

If the surviving relative is a minor or has been placed under guardianship, the legal representative must fill in his/her details here.

B.1 What is your relation to the relative?  Parent [▶ Please enclose \(obligatory\): a copy of the parent's identity document](#)  
 Guardian [▶ Please enclose \(obligatory\): copies of the identity document and the guardianship order](#)  
 Administrator [▶ Please enclose \(obligatory\): copies of the identity document and the administration order](#)

B.2 Surname  gender  m  f

B.3 First name(s)

B.4 Street and house number

B.5 (Postcode and) city / town

B.6 Country

B.7 Telephone number(s)

B.8 E-mail

## 2 Authorised representative

If someone acts on your behalf in the application procedure, this person must fill in his/her details here.

2.1 Surname  gender  m  f

2.2 First name(s)

2.3 Name of the organisation

2.4 Street and house number

2.5 (Postcode and) city / town

2.6 Country

2.7 Telephone number(s)

2.8 E-mail

### 3 Who is the victim?

Please fill in the details of the person who suffered serious and permanent injury as a result of the crime here.

3.1 Surname \_\_\_\_\_ gender  m  f

3.2 First name(s) \_\_\_\_\_

3.3 Date of birth \_\_\_\_\_

3.4 Identity number \_\_\_\_\_

### 4 What happened?

Do you need additional writing space? Please use the 'Additions' sheet for this purpose.

4.1 By what violent crime did the victim suffer serious and permanent injury?

Attempted murder / murder / manslaughter  Stalking

Abuse  Sex crime

Threat of violence  Raid / robbery

Other, namely \_\_\_\_\_

4.2 Scene of the crime \_\_\_\_\_

4.3 Date of the crime \_\_\_\_\_

4.4 Was the crime reported to the police?  Yes [▶ Go to question 4.5](#)  No [▶ Go to question 5](#)

4.5 City / town where the crime was reported to the police \_\_\_\_\_

4.6 Is (or was) the suspect criminally prosecuted?  Yes [▶ Go to question 4.7](#)

No [▶ Go to question 5. Were the charges dismissed? Go to question 4.7](#)

4.7 Number of the official report \_\_\_\_\_

Public Prosecutor's Office number \_\_\_\_\_

4.8 Details of the criminal proceedings \_\_\_\_\_

If you have a copy of the report to the police and/or the judgment, please enclose it with this application.

### 5 What is the victim's injury?

#### Psychical injury

[▶ If you have medical documents, please enclose them with this application.](#)

5.1 Did the victim suffer psychical injury?  No [▶ Go to question 5.3](#)

Yes, namely: \_\_\_\_\_

[▶ Go to question 5.2](#)

5.2 How does the victim's psychical injury affect your life? \_\_\_\_\_

## Psychological injury

► *If you have medical documents, please enclose them with this application.*

5.3 Did the victim suffer psychological injury as a result of the violent crime?  No ► [Go to question 6](#)

Yes, namely:

► [Go to question 5.4](#)

5.4 How does the victim's psychological injury affect your life?

## 6 Existence of Compensation Fund

6.1 How did you learn of the existence of the Compensation Fund?

<input type="checkbox"/> Victim Assistance Office	<input type="checkbox"/> Family doctor
<input type="checkbox"/> Police	<input type="checkbox"/> Public Prosecution Service
<input type="checkbox"/> Lawyer	<input type="checkbox"/> Mental Healthcare Professionals (e.g. psychologist, psychiatrist)
<input type="checkbox"/> The Internet	<input type="checkbox"/> Other, namely

## 7 Signature

**Attention!** *If the relative is a minor or placed under guardianship, the legal representative must sign this form.*

**I have filled in this form truthfully.**

7.1 Date and city /town

7.2 Name

*By signing this form you grant your permission for processing your details / personal details.*

7.3 Signature

Please print out the form to sign it



# Explanation to the form 'Application Compensation for relative'

## General information

### What is the Violent Offences Compensation Fund?

The Violent Offences Compensation Fund is an independent body of the central government. It gives once-only compensation to victims of intentional violent crimes, who have suffered serious physical or psychological injury as a result. Surviving relatives of victims who died as a result of a violent crime or by involuntary manslaughter may also be entitled to receive compensation from the Compensation Fund. This also applies to relatives of victims who suffered serious and permanent injury as a result of a violent crime.

### What are examples of violent crimes?

Abuse, robbery, murder, or manslaughter.

### What is a relative?

This is stipulated in Section 3(2) of the Dutch Violent Offences Compensation Fund Act (*Wet schadefonds geweldsmisdrijven*). A relative is in any case your spouse, your partner/registered partner, parent, child, adopted child, or sibling.

### What is the compensation meant for?

The compensation is a social expression of solidarity and a token of acknowledgement of the distress suffered by a relative of a victim who suffered serious and permanent injury. The compensation is paid from taxpayer's money and is not intended to cover all damage. The compensation is intended to restore the damaged confidence and to help the surviving relatives forward financially, so that they can look into the future again. The recipient may spend it as he/she pleases.

### How does the Compensation Fund determine the amount of the compensation?

The compensation is always a fixed amount of € 5,000 (approximately \$ 5,700) for the distress and any loss suffered by the relative. Examples are costs or therapy or reduced income. The amount to which you are entitled will be paid in euros and transferred to your account in dollars. The final amount in dollars depends on the exchange rate on the day of payment.

### Are you yourself the victim of a crime and did you suffer serious physical or psychological injury as a result?

In that case, you can apply for compensation by completing the form 'Application Compensation for victims'. You will find this form at [www.schadefondscn.com](http://www.schadefondscn.com).

### Has a relative of yours died as a result of a violent crime?

In that case, you can apply for compensation by completing the form 'Application Compensation for surviving relatives'. You can find this form at [www.schadefondscn.com](http://www.schadefondscn.com).

### Scene and date of the crime

This form is intended for relatives of victims with serious and permanent injury resulting from a violent crime committed in the Caribbean Netherlands. To be eligible for compensation, the crime must have been committed on or after 1 January 2019.

## Explanation to each question of this form

### 1A Relative

Fill in the details of the relative for whom the compensation is applied. Also fill in your account number and the bank's BIC/Swift code to which the Compensation Fund can transfer the compensation, if applicable.

**Attention!** You cannot state a savings account.

### 1B Legal representative

If the relative is a minor or has been placed under guardianship, the legal representative must fill in his/her details here. A legal representative is the victim's parent, guardian, or administrator.

### 2 Authorised representative

If you want someone else to act on your behalf in the application procedure, you can authorise someone, for example, an employee of Victim Assistance Office or a family member.

### 3 Who is the victim?

Please fill in the details of the person who suffered serious and permanent injury as a result of the crime here.

### 4 What happened?

In this section, you give information about the violent crime and, if applicable, about the criminal proceedings against the suspect/offender. The Compensation Fund needs details about any criminal proceedings to be able to assess your application better. If you give more information, the Compensation Fund will be able to assess your application faster and better. **Attention!** The Compensation Fund will never contact the offender/suspect.

### 5 What injury did the victim suffer?

In this section, you give general information about the injury the victim suffered as a result of the violent crime. If necessary, the Compensation Fund will ask the person(s) treating you for information. The victim will be asked to consent to this first.

### 6 Existence of Compensation Fund

Here you state how you have learned of the existence of the Compensation Fund.

### 7 Signature

Please follow the instructions on the form for signing this form correctly.

### Do you want to add any information about the violent crime or about its consequences?

Please use the additional sheet for this purpose.

