



Claim No.
Stamp and date of receipt

Application for Pension Forecast

Part 1 : Particulars of applicant

Full name

Maiden name (if applicable)

Address

E-mail address

Daytime phone number

Date of birth

Nationality

Tax reference number

ID card number

Part 1 : Particulars of applicant (continued)

Are you currently in employment? No

Yes

What is or was your occupation?

What is your projected retirement date?

(Please note, if this date is not supplied, the day you attain pensionable age will be used in the calculation of your pension forecast)

Are you a voluntary contributor? No

Yes

What is your current marital or civil partnership status?

Single

Please go to **Part 3**.

Married or civil partner

Divorced or civil partnership dissolved

Marriage or civil partnership annulled

Separated

Widowed or surviving civil partner

*(Please complete **Part 2** if your marital or civil partnership status is not single)*

Part 2 : Particulars of spouse or civil partner

Full name

Maiden name (if applicable)

Date of birth

Tax reference number

ID card number

Has your spouse or civil partner ever worked in Gibraltar?

No

Yes

Date of marriage or civil partnership

Date of divorce or civil partnership final dissolution (if applicable)

If widowed, please state date you were widowed.

No

Yes

Part 3 : Living or working abroad

If at any time, you have lived or worked in another EU country or Iceland, Liechtenstein, Norway or Switzerland, please complete questions below. We need this information because if you paid into the social security system in another country, it may count towards your Old Age Pension.

Have you ever lived or worked outside Gibraltar? No Please go to **Part 4**
Yes Please tell us about this below.

Country 1

Name of the country you lived or worked in

Dates you lived or worked there From

To

Did you pay into the social security scheme of the country? Don't know
No
Yes

If you answered **Yes**, what was your social security number?

Country 2

Name of the country you lived or worked in

Dates you lived or worked there From

To

Part 3 : Living or working abroad (continued)

Did you pay into the social security scheme of the country?

Don't know

No

Yes

If you answered **Yes**, what was your social security number?

If you have lived or worked in more than 2 EU countries tell us about this below

Part 4 : Other information

Use this space to tell us anything else you think we might need to know.

You can continue on a separate piece of paper if you need to.

If you continue on a separate piece of paper, make sure you;

- Write your full name, address and ID card number on it and attach it to this claim form; and
- Sign and date it.

Part 5 : Declaration

I declare that all the statements on this form are true to the best of my knowledge and belief.

I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.

I understand that this is not a claim form.

Applicant's signature

Date

How we collect and use information

The Department of Social Security collects information for the purposes of dealing with social security benefits and other non-contributory benefits. The information we collect about you depends on the reason for your business with us, but we may use the information for any of these purposes.

We may check information about you with other information we have. We may get information about you from other people and certain other organisations. We may give information to certain other organisations, as the law allows, to:

- check the accuracy of information;
- prevent or detect crime;
- protect public funds in other ways; and
- use in research or statistics.

These other organisations include other government departments, local authorities, and private sector bodies such as banks and organisations that may lend you money. We will not give information about you to anyone outside our department unless the law allows us to.

The Department of Social Security is the data controller for the purposes of the Data Protection Act.