PENSIONS MYNDIGHETEN

Application
for Survivor's pension/annuity

Swedish personal ID

Send the form to
Pensionsmyndigheten
SE-839 77 Östersund
Sweden

Remember
Please send one application per person. Attach death certificate and copies of documents that prove your relation to the deceased. Attach copy of your passport if you live outside of Sweden.

1. Applicant (Should be filled in by all applicants)

All Forename(s) and Surname(s)	Swedish personal ID –
Foreign social security number	Date of birth (YYYY, MM, DD) / /
Gender ☐ Female ☐ Male	
Address	Postal code, city
Country of residence	Citizienship
Phone number	E-mail address
Civil status ☐ Single ☐ Married (Wedding date) ☐ Widow, Widower ☐ Divorced (Divorce date)	
Does the applicant receive survivor's pension from another country ☐ No ☐ Yes	
Country	From / Amount

2. Information about the deceased

All Forename(s) and Surname(s)	Swedish personal ID –
Foreign social security number	Date of birth (YYYY, MM, DD) / /
Date of death / /	
Address prior to death	Postal code, city
Country of residence	Citizienship
Civil status prior to death ☐ Single ☐ Married (Wedding date) ☐ Widow, Widower ☐ Divorced (Divorce date)	

Employment outside of Sweden ☐ No ☐ Yes	If yes specifiy period –	Country
Resided outside of Sweden ☐ No ☐ Yes	If yes specifiy period –	Country
Is the death caused by a work related injury, sickness or accident on the way to or from work? ☐ No ☐ Yes		

Postadress
Pensionsmyndigheten
839 77 Östersund

Kundservice
0771-776 776

Webbplats
www.pensionsmyndigheten.se

3. Legal guardian

Complete only if appointed guardian or the applicant is younger than 18 years of age.

☐ Parent is the legal guardian	☐ Other appointed guardian ***Attach copy of guardianship***
All Forename(s) and Surname(s)	
Swedish personal ID —	Foreign social security number
Address	Postal code, city
Country of residence	Gender ☐ Female ☐ Male
Phone number	E-mail address

4. The applicants relationship with the deceased

The applicant is	☐ Adult partner	☐ Child of the deceased

The following questions of the application should only be filled in if the applicant is an adult		
Were you married at the time of death?	☐ No ☐ Yes	From Date
Were you living together at the time of death?	☐ No ☐ Yes	From Date
Do you and the deceased have or are you expecting a child?	☐ No ☐ Yes	From Date
Have you previously been married?	☐ No ☐ Yes	From Date
Were you, at the time of death, living with a minor of whom one of you was legal guardian of?	☐ No ☐ Yes	From Date

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5. Do you want your pension to be paid into an account in a Swedish bank?

Bank account	Clearing No.	Account No.
If you have a Nordea account that consists of your swedish personal ID number please enter 3300 as your clearing number.		

6. Do you want your pension paid into an account in a bank outside Sweden?

Please state account number (if payment is for a bank in Europe, please state the IBAN number)	
The bank's SWIFT address	
The bank's name	Fedwire (US), Transit and institution (CA), BSB (AU)
The bank's address (Street/Road/Post box/postcode and town/city)	Country
We will primarily pay your compensation in Swedish kronor or in the local currency of the country where your bank is located. If none of these options are possible, we will pay your compensation in EUR or USD.	

PM 8542en (003 F 001) Fastställd av Pensionsmyndigheten

7. Other information

	☐ Additional information provided separately

8. Signature

I certify on my honour and conscience that the information in this form is correct and complete. I am aware that I must notify the Swedish Pensions Agency *[Pensionsmyndigheten]* of any changes to this information

Date	Signature
Printed name	

This information will be processed electronically.The Swedish Pensions Agency is the controller of the personal data for this processing.

Confirms hereby that the information below is correct

First name(s) and Surname	Personal identity number/Date of birth
	–
Marital status ☐ Single ☐ Married ☐ Widow, widower ☐ Divorced	
Spouse's/cohabitee's first name(s) and surname	Personal identity number/Date of birth
	–

Date	Authority seal
Authority signature	

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PM 8542en (003 F 001) Faställd av Pensionsmyndigheten

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This is how you fill in the form

Application for
Survivor's pension/annuity (PM 8542)

Please attach death certificate, copies of documents that confirm your relation to the deceased and a copy of your current passport.

Proof of identity
Your identity needs to be verified if you do not currently live in Sweden. Your application needs to be signed and stamped by an authorized agency in your country of residence.

For instance:

- Swedish Embassy
- Swedish Consulate
- Swedish Church
- Social Insurance Institution/Department of Social Security
- Notarius Publicus
- Police Authority
- Population Register Office

Bring your passport or any other valid form of identification to the agency/institution who confirms your identity

1. Applicant
Name, Swedish identification number, address and information if you have survivor's pension from another country than Sweden.

2. Information about the deceased
Name and Swedish identification number.

Country of residence, citizenship and information about work and residence outside Sweden. If the deceased has lived and worked in more than one country, you have to inform about all countries. You can write the information under “Other information” or in additional information provided separately.

You also have to inform if the death is caused by a work accident, a disease caused by work or an accident on the way to or from work. This information is only relevant for jobs in Sweden.

3. Legal guardian
You need to fill this in if there is a legal guardian or if the applicant is a minor, (younger than 18).

Name and identification number for the legal guardian. If the applicant is 18 years or older and has a legal guardian or if the parent is not the legal guardian you need to attach a copy of the decision of guardianship.

4. Applicants relation to the deceased
Note if the applicant is an adult partner or a child of the deceased. If the applicant is an adult answer the remaining questions under item 4.

5. Do you want your pension to be paid into an account in a Swedish bank?
Fill in the account information. Clearing number and account number.

6. Do you want your pension paid to an account in a bank outside Sweden?
Fill in here if you want your pension to an account in a bank outside Sweden.

If you live in a country in Europe you need an account number in international format (IBAN). For accounts in USA, Canada and Australia you need an account number and a bank code - Fedwire for USA, Transit and institution for Canada and BSB for Australia.

8699

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7. Other information
If you have additional information you think you need to inform us about. Please leave the information here. You can also write additional information and provide it separately.

8. Signature
Here, you certify that to the best of your knowledge the information provided on this form and its attachments is accurate and complete. If any changes regarding any information, you are obliged to inform Swedish Pensions Agency as it can affect your Swedish pension.

8699

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