

1 Application for the reimbursement of pension contributions

The undersigned requests that his/her pension contributions be reimbursed by the Pension Fund for State Employees. In order for a reimbursement to take place, the applicant must be moving to a country outside of the European Economic Area (EEA). After March 1, 2019, it is prohibited to reimburse pension contribution to American citizens. Further information can be found at: www.lsr.is.

2 Applicant

Name _____ ID no. _____

Address _____

Po.no. _____ City _____

E-mail address _____

Tel _____ Mobile _____

3 Documents supporting the application

The applicant needs to meet certain requirements in order for a reimbursement to take place. Therefore each case needs to be assessed beforehand.

The following must be enclosed:

- Employer's confirmation of an employment termination.
- Copy of a passenger ticket back to the home country or an equivalent confirmation.
- Copy of applicant's passport.
- Bank account number in Iceland: _____

Additionally, to be eligible for reimbursement, the applicant must submit a statement from their country of current permanent residence confirming they have lived there for at least three months.

4 Signature

The undersigned understands and recognises that reimbursement will cancel all benefits from the Fund. Reimbursement of contributions will be taxed in the same manner as pension payments.

Date

Signature of applicant