

Application for spouse pension

Name of applicant		ID No.		
Address		Postcode and location		
Email		Phone/Mobile		
Bank account				
Bank- sort code – account number				
Name of deceased fund member		ID No.	Date of	⁻ decease
Is surviving spouse assessed as disabled?		Was fund member receiving a retirement or disability pension at the time of decease? ☐ Yes ☐ No		isability pension at the time
Names, ID Nos. and banking information relating to children*				
Child's name	Child's ID No.		Bank – sort code – account number	
Child's name	Child's ID No.		Bank – sort code – account number	
Child's name	Child's ID No.		Bank – sort code – account number	
* Child benefit is paid on the last day of each month until the child is 18 years of age				
Tax brackets				
□ Tax bracket 1 (31,48% tax on total taxable income below ISK 446.137 per month) □ Tax bracket 2 (37,98% tax on total taxable income ISK 446.137- 1.252.501 per month) □ Tax bracket 3 (46.28% tax on total taxable income above ISK 1.252.501 per month)				
Or other monthly taxable income:				
Personal tax credit				
Utilise % of personal tax credit, commencing from (date)				
□ Utilise accumulated personal tax credit ISK				
Spouse's personal tax credit				
□ Utilise % of spouse's personal tax credit, commencing from (date)				
By my signature, I accept that the information I provide in this application will be saved and registered in my transaction history at Stapi Pension Fund. All processing of personal information, including its acquisition, registration, electronic recording and handling is in accordance with the Act on Personal Data Protection and the personal data protection policy of Stapi Pension Fund, published on the Fund's website.				
Date Applicant's signature				
Application deadline is until the 15th of each month, with regard to payments at the end of the month.				

Stapi lífeyrissjóður Strandgötu 3,600 Akureyri Sími 460 4500 www.stapi.is stapi@stapi.is