

Public Pension

You decide when you wish to draw your public pension. You can draw income pension [*inkomstpension*], supplementary pension [*tilläggs pension*] and premium pension [*premi epension*] at the earliest from and including the month you attain the age of 61. You can draw guarantee pension [*garantipension*] at the earliest from and including the month you turn 65.

Application form

You must fill in an application when you wish to draw your public pension. Please send in your application form three months before you want to take out your pension. You can be granted a public pension at the earliest from and including the month when the application form has been received by Pensionsmyndigheten [*the Swedish Pensions Agency*]. Please send your application form to

Pensionsmyndigheten
SE-106 44 Stockholm
Sweden

Certification of personal particulars

As you do not live in Sweden, your personal particulars must be certified. This certification is at the bottom of page 2 of the form. Take your application form to a population register authority, social insurance agency or police authority in the country where you live. You can also contact Försäkringskassan [*The Swedish Social Insurance Agency*], Pensionsmyndigheten [*The Swedish Pensions Agency*] in Sweden, a Swedish consulate or a notary public.

Show your passport or another identity document to the person who is to sign the document.

Do you need more information?

Please contact us at +46 498 200 700 if you have any questions. More information on public pension is available at www.pensionsmyndigheten.se.

Yours sincerely,

Pensionsmyndigheten

Postadress

Pensionsmyndigheten
106 44 Stockholm

Kundservice

0771-776 776

Webbplats

www.pensionsmyndigheten.se

Instructions on how to complete the form "Application for public pension - if you live outside Sweden".

1. Name and family circumstances

Please check that any information already filled in is correct.

2. How do you wish to draw your pension?

State here how large amount of the pension you wish to draw and which parts of the public pension you wish to draw. If, for example, you wish to draw full income pension and supplementary pension, you should cross the box for a full monthly amount (100% withdrawal level) on the first line.

If you do not wish to draw all parts of your pension, you should cross "no withdrawal" for the part you do not wish to receive.

Income pension and premium pension are calculated according to the amount you have earned for your pension during your working life.

If you were born between 1938 and 1953, you may be entitled to supplementary pension. Supplementary pension is based on the pension points you have earned during the years you have worked.

Guarantee pension is basic cover for those who have had a small or no income during their life. You can receive a guarantee pension from and including the month you turn 65. When you apply for income pension and supplementary pension, you apply for guarantee pension at the same time. If you draw your pension before the age of 65, you will not receive a decision on guarantee pension. You will receive this first when you turn 65.

You must fill in a separate form if you wish to draw part of your pension from a different date.

3. Do you want to change to traditional insurance ?

(voluntary application for premium pension)

You only need to put a cross in the box if you want to change from unit-linked insurance to traditional insurance.

If you do not fill in anything your outstanding premium pension account will remain in fund shares (unit-linked insurance). The size of your premium pension will then vary from year to year due to change in value of your fund shares.

If you choose traditional insurance by putting a cross in the box Pensionsmyndigheten will sell your share holdings and take over the financial risk by offering a guaranteed pension sum. Your premium pension will then consist of a guaranteed sum plus a possible supplementary sum.

When Pensionsmyndigheten has started to redeem your share holdings you cannot return to unit-linked insurance .

If you do not choose traditional insurance now you can apply for it at a later date.

4. Do you want to apply for survivor's benefit?

(voluntary application for premium pension)

You need only put a cross in the box for survivor's benefit if you want to apply for survivor's benefit. As a rule you can only apply for survivor's pension when you take out premium pension for the first time. Survivor's benefit can only be granted to your spouse/registered partner or for a person who is unmarried and with whom you live and to whom you have previously been married/been registered partner or have or have had children with.

If you choose a premium pension with survivor's benefit it is paid out as long as you and your spouse/registered partner are alive. Please note that your monthly sum will be lower if you choose a survivor's benefit.

The survivor's benefit can only be cancelled if you get divorced or if your live-in partnership ceases by ceasing to live together. You must yourself report the divorce, or that the live-in partnership has ceased, to Pensionsmyndigheten.

5. Do you want your pension put into an account in a Swedish bank?

Fill in details here if you want your pension paid into an account in a Swedish bank.

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

If you want your pension paid into an account in a bank outside Sweden please fill in details here.

7. The tax registration number

If you live outside Sweden and pay special income tax, you should provide information about your tax registration number in the country where you live.

Pensionsmyndigheten uses this number for the statement of earnings and tax deductions submitted to the Swedish Tax Agency [*Skatteverket*].

The tax registration number is the number you use in contact with the tax agency in the country where you live.

Please do not use this form if you are living within the EU/EEA or Switzerland but apply instead to the pension agency in the country where you live

Please send the form to: Pensionsmyndigheten
SE-106 44 Stockholm, Sweden

1. Name and family circumstances

Forename(s) and Surname		Swedish personal ID/no./Date of birth	
Address (road/street/post box)		Country	
Postcode and town/city		Telephone no., incl. country and area code (voluntary information)	
I am <input type="checkbox"/> married/registered partner <input type="checkbox"/> I and my husband/wife/partner have not lived together since		Year	Month Day
I am <input type="checkbox"/> I cohabit with someone with whom I have previously been married/registered partner, have or have had children with			
Forename(s) and surname of husband/wife/registered partner/common-law spouse		Swedish personal ID no./Date of birth	
I am <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower			

2. How do you wish to draw your pension?

Income, supplementary and guarantee pension	<input type="checkbox"/> Full monthly amount	<input type="checkbox"/> Three-quarter monthly amount	<input type="checkbox"/> Half monthly amount	<input type="checkbox"/> One-quarter monthly amount	<input type="checkbox"/> No withdrawal
Premium pension	<input type="checkbox"/> Full monthly amount	<input type="checkbox"/> Three-quarter monthly amount	<input type="checkbox"/> Half monthly amount	<input type="checkbox"/> One-quarter monthly amount	<input type="checkbox"/> No withdrawal
I wish to draw my pension from and including					Year Month
					2 0 - -

3. Do you want to change to traditional insurance?

(voluntary application for premium pension)

Read more about this Information on the application form.

I want to change from unit-linked insurance to traditional insurance. This means that my fund share holdings will be sold and I cannot go back to unit-linked insurance when Pensionsmyndigheten has started to redeem my fund share holdings.

4. Do you want to apply for survivor's benefit?

(voluntary application for premium pension)

Read more about this Information on the application form.

I am applying for survivor's benefit for my spouse/partner/live-in partner as I informed you under section 1. I am aware that I can only apply for survivor's benefit the first time I apply for a premium pension.

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

Yes.

Fill in details below

<input type="checkbox"/> Personal account at Nordea. Put a cross here if the account number is the same as your Swedish personal identity number.	<input type="checkbox"/> PlusGiro	PlusGiro number
<input type="checkbox"/> Bank account	Clearing No.	Account No.

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

Yes.

Fill in details below

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 and address (Street/Road/Post box)

The bank's address (postcode and town/city) Country

Choice of currency for payment Agency only makes payments in SEK or in the local currency of the recipient country! If no currency is stated Pensionsmyndigheten will decide on the currency.

7. Tax registration number

Please state your tax registration number in the country where you live. Tax Registration Number

If there is insufficient space in the lines in section 8-11, you can provide information in an appendix.

8. I have lived in different countries since the age of 15 State all the countries you have lived in including Sweden

Country	From (year, month, day) - To (year, month, day)	Insurance Number
	—	
	—	
	—	

9. I have worked outside Sweden since the age of 15

Country	From (year, month, day) - To (year, month, day)	Insurance Number
	—	
	—	
	—	

10. Do you receive a pension or an annuity from any other country than Sweden?

No Yes. **Fill in details below**

Type of pension/annuity	Annual amount	State currency	From
Country	Paid by		
Type of pension/annuity	Annual amount	State currency	From
Country	Paid by		
Type of pension/annuity	Annual amount	State currency	From
Country	Paid by		

11. Have you paid Swedish seaman's tax before 1974?
(to be applied if you were not a Swedish citizen at this time)

No Yes. **Fill in details below**

Ship/shipping company	From (year, month, day) - To (year, month, day)
	—
	—

12. 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 _____

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

Härmed intygas att nedan angivna personuppgifter är riktiga/ I hereby confirm that the information below is correct

Förnamn och efternamn/First name(s) and Surname	Personnummer/födelsedatum/ Personal ID no/Date of Birth
Civilstånd/Marital status <input type="checkbox"/> gift/registrerad partner/ married/registered partner <input type="checkbox"/> ogift/ unmarried <input type="checkbox"/> skild/ divorced <input type="checkbox"/> änka/änkling/ widow/widower	
Makens/partners/sambons förnamn och efternamn/ Spouse's/partner's/cohabitee's first name(s) and surname	Personnummer/födelsedatum/ Personal ID no/Date of Birth

Datum/Date	Myndighetens stämpel/Authority seal
Myndighetens underskrift/Authority signature	