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| **Lífeyrisauki** |  |
| Application for payout of pension |  |
| *To non EEA and non USA citizens when emigrating from Iceland* |  |

**I the undersigned, request that my pension be paid out of Lífeyrisauki when I emigrate from Iceland:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | |  |  |
| Name of fund member | | |  | Icelandic ID-number (kennitala) |
|  |  |  |  |  |
| Address |  | Post Code |  | Place |
|  | | |  | / |
| E-mail | | |  | Telephone / Mobile |

Please note that the fund member's savings may increase or decrease in line with changes in the price of the fund between the date of the application and the date when payment is made.

**Documents included with application:**

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| --- | --- | --- | --- |
| **Documents which must be included with application:**  Copy of passport/s  Copy of travel ticket    Confirmation of termination of employment  Confirmation from National Registry (Þjóðskrá) | |  | |
| **Comments:** |  | |  |
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**Payment should be made into the Icelandic bank account registered under the fund member’s ID-Number:**

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| --- | --- | --- |
| Bank no.: | Code: | Account no.: |

**Tax information:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Pension payments are subject to withholding tax just like other types of income. There are now three tax brackets. If you receive income from another source which affects the calculation of withholding tax, it is your responsibility to inform the fund by reporting other monthly taxable income below, or filling in the number of the tax bracket in which taxation should start.   |  |  |  |  | | --- | --- | --- | --- | | Other monthly taxable income,  before tax: |  | Or number of tax bracket in which taxation should begin: |  |   **Personal allowance:** the fund is not permitted to obtain information on your past use of your tax allowance, even though tax cards are now digital. Please state your preference below:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | I would like to use |  | (% or ISK) of my personal allowance from (date): |  |  | ***Name of spouse:*** | | I would like to use |  | (% or ISK) of **spouse’s** personal allowance from (date): |  |  |  | | I would like to use |  | (ISK) unused/accumulated personal allowance. |  |  | ***ID-No. of spouse:*** | | I would like to use |  | (ISK) unused/accumulated **spouse’s** personal allowance |  |  |  | |  |  |  |  |  | |   You can use 100% of your spouse's tax allowance in the case of joint taxation. You can use the tax allowance of a deceased spouse for up to nine months from the date of death. For further information please visit www.rsk.is. |

**Comments:**

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**The following countries are within the EEA:**

**EFTA countries:** Iceland, Liechtenstein and Norway

**EU countries:** United Kingdom, France, Germany, Sweden, Finland, Spain, Portugal, Italy, Denmark, Netherlands, Belgium, Luxembourg, Greece, Ireland, Austria, Estonia, Latvia, Lithuania, Poland, Czech Republic, Slovakia, Hungary, Slovenia, Malta, Cyprus (Greek-speaking part), Romania, Bulgaria and Croatia.

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| --- | --- | --- | --- |
|  |  |  | |
| Place and date | Signature of fund member | |
|  |  |  |  | |
| Received on behalf of Arion Bank (name of employee) | Branchnumber | Date | |

Further information can be obtained at arionbanki.is/lifeyrir and from Arion Bank Pensions on (+354) 444 7000 or [lifeyristhjonusta@arionbanki.is](mailto:lifeyristhjonusta@arionbanki.is).

Send by email to utgreidslur@arionbanki.is or by mail to Lífeyrisþjónusta, Túngötu 3, 580 Siglufjörður Eintak Arion banka – B beiðni