

# NSA PROVIDENT FUND

## CLAIM FORM

NSA Provident Fund  
for Filipino seafarers

## RETURN CLAIM FORM TO:

Storebrand Pension Services AS  
Provident Fund  
Professor Kohts vei 9, P.O.Box 455  
1327 Lysaker, Norway

## Member's information

Membership No. : \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Last Name : \_\_\_\_\_ Place of Birth : \_\_\_\_\_

First / Middle Name : \_\_\_\_\_

Address : \_\_\_\_\_

: \_\_\_\_\_

National Social Security No. : \_\_\_\_\_ Tax Identification No.: \_\_\_\_\_

Jurisdiction of tax residence : \_\_\_\_\_

E-mail address : \_\_\_\_\_

*NOTE: When receiving your benefits you are strongly recommended to seek information as to whether the received amount is taxable in the country/countries where you are resident/tax resident.*

Name of Employer	Name of Vessel	Sign-on Date	Sign-off Date

## PAYMENT CONCERNING:

- RETIREMENT** In case of Retirement, please enclose the following documents;
- A certified copy of your personal passport
  - A copy of your Norwegian Seaman's documentation book
  - and/or certificate of seagoing service from employers
  - **IMPORTANT;** In order for Storebrand to proceed with your application please make sure that National Social security No., Tax identification No., Jurisdiction of tax residence and Place of Birth are provided!
  - A copy of a bank statement or, a rates/utility bill as evidence of your address
- DISABILITY** In case of Disability please enclose the following documents;
- The documents listed under Retirement
  - A confirmation from a doctor or hospital authorized by Norwegian authorities stating your permanent disability
- DEATH** In case of Death please enclose the following documents;
- The documents listed under Retirement
  - A certified copy of the death certificate
  - A copy of Marriage Contract – if Spouse
  - A certified passport copy of designated beneficiary

**Bank payment details:** SETTLEMENT CAN ONLY BE MADE TO A BANK ACCOUNT IN YOUR NAME!

Name of Account Holder : \_\_\_\_\_  
Account Number : \_\_\_\_\_  
Name of Bank : \_\_\_\_\_  
Bank Branch/Address : \_\_\_\_\_  
S.W.I.F.T / BIC Code : \_\_\_\_\_  
IBAN : \_\_\_\_\_

**In case of death, the following information is requested from beneficiaries:**

Date of Birth : \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Last Name : \_\_\_\_\_ Last Name: \_\_\_\_\_  
First Name : \_\_\_\_\_  
Address : \_\_\_\_\_  
: \_\_\_\_\_  
Relation to Member : \_\_\_\_\_ E-mail address (optional): \_\_\_\_\_  
National Social Security No.: \_\_\_\_\_ Tax Identification No.: \_\_\_\_\_  
Jurisdiction of tax residence: \_\_\_\_\_

**IMPORTANT:** In order for Storebrand to proceed with your application please ensure to provide National Social Security No., Tax Identification No., Jurisdiction of tax residence and Place of Birth.

**Bank payment details:**

Name of Account Holder : \_\_\_\_\_  
Account Number : \_\_\_\_\_  
Name of Bank : \_\_\_\_\_  
Bank Branch/Address : \_\_\_\_\_  
S.W.I.F.T / BIC Code : \_\_\_\_\_  
IBAN : \_\_\_\_\_

**IMPORTANT:** Due to new General Data Protection Regulation law with an enforcement date of May 25, 2018, Storebrand will no longer be able to receive e-mails containing any kind of personal data or information, nor documents containing personal data or information. Storebrand cannot guarantee that messages sent via regular, unsecured e-mail over the internet will not be known to others. Therefore, the documents must be sent by ordinary post as hard copy.

\_\_\_\_\_  
Place and Date

\_\_\_\_\_  
Member's / Beneficiary's signature