

Application for a contribution repayment

I am a citizen of a country outside the European Economic Area (EEA) or USA and I am leaving Iceland. I hereby apply for the repayment of my pension contribution at Lífeyrissjóður verzlunarmanna. **Applicant** Name Id./Reg. No. Address Postal code and location Home tel. / Mobile E-mail address **Bank Account** Bank Number Book Number Account Number Name of Bank Branch Required documents supporting the application Confirmation from the last employer regarding termination of employment Copy of the last payslip Copy of the applicant's passport Copy of a passenger ticket back to the home country or an equivalent confirmation I hereby understand and recognise that the contribution repayment will cancel all benefits from the Fund. The repayment of contribution will be taxed in the same manner as pension payments. **Undersigned**





PRINT

Signature



CLEAR

Date and location