

Application for old age pension, income insurance, supplement for support and related payments

In accordance with the Act on Social Insurance no. 100/2007 and the Act on Social Support no. 99/2007.

The undersigned application shall be sent to the Social Insurance Administration (SIA) or its agents.

- The right to old age pension is based on the age of 67. The full right in Iceland is based on 40 years of residence from 16 – 67 years of age. Those having lived and worked in other countries can obtain a right to pension payments from previous country of residence against payments from Iceland.
- If the application is postponed until 72 years of age, the old age pension, income insurance and the household supplement will increase by 0.5% for each month. An application for old age pension terminates authorisation for postponement.

An income estimate must accompany an application for old age pension.

1. Name of applicant		2. National ID	
3. Domicile		4. Postal code	5. Town/City
6. Home telephone / Mobile	7. Email address		

8. You must first apply for an old age pension from your pension fund before you apply at SIA. Documents must be presented which confirm whether you have rights or not.	
Do you have a right to payments from a mandatory employment-related pension(s)?	<input type="checkbox"/> Yes—Where? <input type="checkbox"/> No
Have you lived and/or worked abroad?	<input type="checkbox"/> Yes—Where? <input type="checkbox"/> No
Do you have pension rights abroad?	<input type="checkbox"/> Yes—Where? <input type="checkbox"/> No

9. A household supplement may be paid to a pensioner benefitting from income insurance if he or she operates a household alone, has a spouse in a nursing home, lives with a child/children younger than 18 years of age, or youth(s) 18-20 years old that are in school.	
Are you applying for a household supplement?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Housing circumstances:	
Do you live in your own property? Accompanying documents: None	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you live in rental housing? Accompanying documents: Signed housing lease agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any other circumstances that can affect payments?	

10. A pension supplement may be paid regarding own expenditure if the total income, including payments from SIA, are less than ISK 225,070 per month, and money assets or stocks are less than ISK 4,000,000 (ISK 8,000,000 for a married couple/cohabiters).	
Are you applying for a pension supplement?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, because of:	
<input type="checkbox"/> Medicinal product or medical assistance Accompanying documents: None, costs are assessed in accordance with information from Icelandic Health Insurance	
<input type="checkbox"/> Home care . Accompanying documents: Confirmation of costs not paid by government parties	
<input type="checkbox"/> Electricity for oxygen filter Accompanying documents: SIA seeks confirmation from the National-University Hospital.	
<input type="checkbox"/> Regarding hearing aid purchase Accompanying documents: Invoice for purchase of hearing aids, not more than four years old.	
<input type="checkbox"/> Residing in a community residence/halfway house Accompanying documents: Signed confirmation of residence from a supervisor/director.	
<input type="checkbox"/> Housing rental that falls outside a municipality's housing allowance? Accompanying documents: Housing rental agreement, signed by lessor/agent and lessee, and confirmation that there is no right to a housing allowance.	

11. Child allowance may be paid to a pensioner supporting his or her own child/children under the age of 18.	
Are you applying for a child allowance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you supporting a child/children under the age of 18?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please write the names and National IDs of children and their parents, if relevant. Names of children residing with others / not living at the applicant's must also be included.

Child's name	National ID no.
Names of parents	National IDs of parents
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12. Other information or special requests, e.g., if retroactive payments are applied for.

13. Payments shall be deposited to the applicant's following bank account:		
Iban number:	SWIFT code:	Account number:

With my signature I authorise the SIA to gather necessary information that may affect the amount of payments, for monitoring and collecting overpaid allowances, from tax authorities, pension funds, the Unemployment Insurance Fund, the Directorate of Labour and from comparable agencies and institutions abroad, if relevant. I also grant the SIA authority to gather necessary documents from Icelandic Health Insurance, Registers Iceland, the Municipal Child Support Collection Centre, the State Prison Administration, the Directorate of Immigration, National Commissioner of the Icelandic Police, Icelandic Transport Authority, medical institutions, sanatoriums and nursing homes, municipalities, Icelandic Student Loan Fund, recognised educational institutions within the general educational system and university-level schools in order to be able to assess the right to payments. I confirm that I will notify the institution of changes in my income or other circumstances that could affect payments to me.

Place and date:	Applicant's signature:
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- An estimate of income forms the basis of the calculation of payments. If the estimate of income is not submitted, the payments will be based on the last tax return. The applicant/ recipient is responsible for SIA having correct information on income.
- Income related payments are calculated every year when the confirmed tax return is on file. SIA corrects payments if there is reason to do so.
- If retroactive payments are being applied for, it can result in a new determination by the tax authorities.
- If fraudulent conduct of a pensioner is discovered, SIA has a duty to demand repayment with a 15% surplus. Serious cases are referred to the police.