PKDW
Pensionskasse für die Deutsche Wirtschaft

Pensionskasse
für die Deutsche Wirtschaft
Postfach 10 10 54
47010 Duisburg

Applicant:

Membership number

Surname, first name

Street, number

Postcode, town/city

Phone number in case of further questions (not mandatory)

Email address in case of further questions (not mandatory)

Application for Survivor‘s Pension

☐ for widows, widowers and registered civil partners

I hereby apply for my PKDW survivor‘s pension

Please transfer my pension to this account

IBAN

Swift-BIC

Bank

My health insurance provider is

Name of health insurance provider

Postcode, town/city

My tax ID number is

11-digit tax ID number

My social security number is

See pension notice / social security card

Membership number

☐ I have a child / several children

Please enclose appropriate proof with your application, e.g. birth certificate, certificate of parentage, adoption certificate, etc.

Information on the 1st child

Surname, first name

Date of birth

Information on the 2nd child

Surname, first name

Date of birth

Information on the 3rd child

Surname, first name

Date of birth

Information on the 4th child

Surname, first name

Date of birth

Information on the 5th child

Surname, first name

Date of birth

Note: The pension fund requires this information as part of the notification to your health insurance fund. The contribution rate in the statutory long-term care insurance depends on the age and number of your children. If you have private health insurance, you settle your long-term care insurance directly with your health insurance fund; you can skip this point.

Membership number

Please find the death certificate enclosed
The death certificate has already been submitted

Please find the marriage/civil partnership certificate enclosed

☐ I have enclosed the insurance certificate
☐ I do not have the insurance certificate

☐ The deceased has dependent children **under the age of 18**

☐ The deceased has dependent children who are over the age of 18 but under the age of 25

Important note: If the deceased leaves behind dependent children of legal age who have reached the age of 18 but not yet the age of 25, please contact us on +49 203 99219-72. We will assess together whether the child may be entitled to an orphan’s pension in accordance with our General Terms and Conditions of Insurance (GTCI) and what further documents are required.

You are, of course, allowed to ensure that any data that is not relevant for the pension fund in carrying out the contract cannot be used to identify you personally.

The personal data relating to the insurance contract will be processed in accordance with the requirements of the EU General Data Protection Regulation (GDPR) and the new version of the Federal Data Protection Act (BDSG) within the meaning of Article 4 (2) GDPR.

I have answered the questions above fully and truthfully.

Date, signature

For children under 18: signature of the person with parental responsibility also required