



## Retirement notification by the employer

Employer / pension fund

Pension plan

### Insured person:

Name

First name

Date of birth

Civil status at retirement

- single     married     divorced     widowed  
 registered partnership     dissolved partnership

Social security number

756.

Street, no.

Postcode, City

### Retirement per

Type of retirement

- Full retirement     Partial retirement

Additional information for partial retirement

Annual salary after partial retirement  
Level of employment after partial retirement

Place

Signature of employer

Date