

DSFA Website – Instructions for completion of form EU P65

How to complete your application for EU Pension using form EU P65.

(Please print down this page and use as a guide to filling in the form).

- Please use **black ball point pen**.
- Only use **BLOCK LETTERS** and place an **X** in the relevant boxes.
- Please answer **all questions** that apply to you. If a question does not apply to you, please leave the answer area **blank** (no pen strokes).
- You will need a Personal Public Service Number (PPS Number) before you apply. More information on this is available in this website.
- If you do not have a spouse or partner, fill in **Parts 1, 3 and 4** as they apply to you. When the form is completed, read the important information in **Part 5** and complete the **Checklist**. Then sign the Declaration in **Part 1**.
- If you have a spouse or partner, fill in **Parts 1, 2, 3 and 4** as they apply to you. When the form is completed, read the important information in **Part 5** and complete the **Checklist**. Then sign the Declaration in **Part 1**.
- If you need any help to complete this form, please contact your local Social Welfare Office or Citizens Information Centre.

Country 2

Country:

Your employers name:

Your employers address:

Your social insurance number while there:

Dates you worked there: From / /
D D M M Y Y Y Y

To / /
D D M M Y Y Y Y

Type of work:

Country 3

Country:

Your employers name:

Your employers address:

Your social insurance number while there:

Dates you worked there: From / /
D D M M Y Y Y Y

To / /
D D M M Y Y Y Y

Type of work:

Note: A separate sheet of paper can be used for more details if needed

15. If you are you getting a social security payment from another country please specify

Country:

Type of payment:

Claim or reference number:

Amount: € . a week (in Euro)



Please complete this section by filling in details for your spouse or partner

16. Title: Mr. Mrs. Ms. Other

17. Their surname:

18. Their firstname:

19. Their birth surname:

20. Their address:
Only answer this question if you are married and do NOT live together.

21. Their date of birth: / /
D D M M Y Y Y Y

22. Their PPS No:

23. Their UK National Insurance No.:

24. Other EU Country Insurance Number:

25. Country they were born in:

26. If they are employed or self employed please state
Their gross pay:
Gross pay is pay before tax, PRSI, union € , . a week (in Euro)
dues or other deductions.

27. If they are getting or if they have applied for any payment(s) from this department or the Irish Health Service Executive or from another country please state

Type of payment:

Date payment started: / /
D D M M Y Y Y Y

Their claim or reference number:

Amount: € , . a week (in Euro)

Country of payment

28. If they have income from any other source, such as an occupational pension or private pension then please state

Source of income:

Amount: € , . a week (in Euro)



Personal Public Service Number (PPS No.)

You must supply your own PPS No and also the PPS No of a spouse, partner or children. If you do not know these numbers, please contact your local Social Welfare Office. They will let you know your PPS number. If you do not have one they will let you know what you have to do to get one.

Please see www.welfare.ie for more information

Please enclose the following certificates and documents with your application.

If you cannot send in one right away, please enclose a note stating that the certificate or document will follow later. If sending certificates or documents at a later date, please remember to state your full name, address and PPS Number. **We cannot accept photocopies.**

- Your birth certificate (**only if born outside the Republic of Ireland**) Yes No

- Your marriage certificate (**only if you were married outside the Republic of Ireland**). Yes No

- Your spouse's or partner's birth certificate (**only if your spouse or partner was born outside the Republic of Ireland**). Yes No

- Your child(ren)'s birth certificate(s) for children born outside the Republic of Ireland) **Note: No birth certificate is needed if you are already getting Child Benefit in the Republic of Ireland.** Yes No

Please remember to sign the declaration in Part 1.



State Pension (Contributory) Section
Social Welfare Services
Department of Social and Family Affairs
College Road
Sligo

If you need help filling in this form, please contact your local Social Welfare Office.

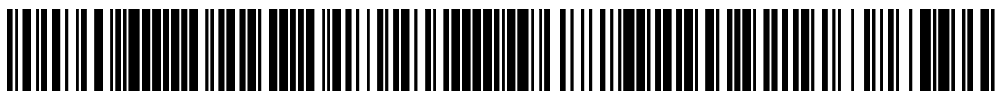
Data Protection and Freedom of Information

We, the Department of Social and Family Affairs, will treat all information and personal data you give us as confidential. We will only disclose it to other people and bodies in accordance with law

Explanations and terms used in this form are intended as a guide only and do not purport to be a legal interpretation

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