MRPS-003-01



Foreign Pensioner's Nomination form

Maldives Pension Administration Office

8th Floor, Allied Building, Chaandhanee Magu, Male', Maldives

L 1441	☑ info@pension.gov.mv	¶ ☑ /pensionoffice	⊘ w	ww.pension.gov.m
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Materials required to be submitted with this form	Nominee detail (Nominee shall not be a Maldivian)
▶ Applicant's Passport copy (Data page) Nominee's Passport copy (Data page)	Name:
Pensioner's Information	Current Passport No:
Name:	Previous Passport Nos (If any):
Passport No: Date of Birth: Day Month Year Phone / Mobile number: Email: Address Permanent Address:	Date of Birth: Day Month Year Phone / Mobile number: Email: Relationship to pensioner (if any): Contact Address:
Current Address: Mailing Address:	Witness O2 witnesses are required: witness must not be a relative or nominee I certify that the above declaration (Declaration by the pensioner) was signed in m presence by the pensioner. I also declare that information provided in this application form is true and accurate. I agree that providing false information is fraud under Chapter 3, Articles 62-68 of the Maldives Penal Code. Name: Passport No:
Declaration by the Pensioner Places sign this in the presence of two witness	
I would like to declare the individual named in this form as nominee to receive pension benefit on my behalf. I confirm that any previous nominations I have made are cancelled in favour of this one, and I understand any amendments required to this nomination will require new application. I also declare that information provided in this application form is true and accurate. I agree that providing false information is a fraud under Chapter 3, Articles 62-68 of the Maldives Penal Code. Name:	Signature and Finger Print Name: Passport No:
Signature and Finger Print	Signature and Finger Print

Notary Acknowledgement 7	Indemnity 8
Name of the country: On this (insert day) day of (insert month), 20,	The Pensioner understands the risks involved in issuing the pension funds to the nominee appointed by the Pensioner and by appointing a Nominee to issue the pension funds, the Pensioner hereby agrees to indemnify and hold the Pension Office harmless from and against any and all claims, suits, executions, liabilities losses, damages, costs, and expenses including but not limited to attorney fees arising out of issuing the said funds to the Nominee by the Pension Office.
before me, the undersigned notary public, personally appeared	
(insert name of the document signer), proved me through satisfactory evidence of identification, which were (insert type of ID presented), to be the person who signed this document in my	Official use only Checklist for the party receiving this form All information in this form have been completed Passport details presented by the Pensioner and Nominee are correct and the passports are not expired Passport copy of the Pensioner & Nominee are attached Applicant has signed and fingerprint are given
presence, and who swore or affirmed to me that the contents of the docume are truthful and accurate to the best of	For the use of Maldives Pension Administration Office only
(insert her/His name) knowledge and belief. Official seal	Form received on: Day Month Year
Signature of Notary Public Commission Expires:	Signature: Official stamp

Fore	eign Pensioner's Nomination Form
Acknowle	edgement
Name:	
	Passport no:
	Tassportine.