MARS PENSIOEN FONDS

Authorization to request pension information

IIR-037

WHAT IS THIS FORM FOR?
You can use this form to authorize someone else, such as your employer, a family member, or the trade union, to request and receive your pension information.

Please note: You cannot use this authorization to have someone else apply for a pension or make other financial decisions.

WHAT ELSE DO YOU NEED TO SEND
Enclose a copy of the passport, identity card, or driving license of both the person giving the authorization and the person who is being authorized.

Make sure the following details are made unrecognizable: the passport photo, the strip of numbers and codes at the bottom of the passport, the document number, and the citizen service number (burgerservicenummer or BSN). We do not need this data.

RETURNING THE FORM
You can upload this form via 'Upload documents' in MijnMarsPensioen or send it by post.

For this you can use our freepost number within the Netherlands:

Answer number 668, 1180 WB Amstelveen (no stamp required).

Outside the Netherlands, use the PO Box address: PO Box 123, 1180 AC Amstelveen (with stamp).

1 Your details

Provide the details of the person who is issuing the authorization.

1.1 Policy number

You can find this on our letters under 'Our reference'

1.2 Name

Initials

Last name

1.3 Date of birth (dd-mm-yyyy)

1.4 E-mail address

2 Details of the authorized representative

Now provide the details of the person you are authorizing.

2.1 Name of the employer, union, relative, or other third party

2.2 Contact name

2.3 Address

2.4 Zip code and town/city

Zip code

Town/city

3 Signature

3.1 Place and date (dd-mm-yyyy)

3.2 Signature

Member/person issuing the authorization

Authorized representative