



# BELIZE SOCIAL SECURITY BOARD PENSIONER'S DECLARATION



## Retirement, Invalidity & Disablement Pensioners

\* DECLARATIONS IN RESPECT OF LIFE MUST BE MADE BY A JUSTICE OF THE PEACE, MINISTER OF RELIGION, BELIZEAN CONSULATE, NOTARY PUBLIC OR SUCH OTHER PERSON RECOGNIZED BY THE BOARD IN THE COUNTRY OF ORIGIN.

Receiving: \_\_\_\_\_ in respect of:

**A - LIFE DECLARATION:** For people *65 years and over* on **Retirement Benefit (RB)** and for people receiving **Disablement Pensions (DP)**.

I, \_\_\_\_\_ do declare that \_\_\_\_\_

came before me this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_ and signed his/her name below.

**Signature of Pensioner:** \_\_\_\_\_

**Address of Pensioner:** (If different from above) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

POSITION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**B - EMPLOYMENT DECLARATION:** For persons *receiving Invalidity Benefit* and for persons *under age 65* receiving **Retirement Benefit**.

I, \_\_\_\_\_, declare that I was not employed for the months

(State Period) \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Witness: \_\_\_\_\_

**PLEASE NOTE THAT A FALSE DECLARATION IS AN OFFENCE AND IS SUBJECT TO PROSECUTION**