



APPLICATION FOR THE REIMBURSEMENT OF CONTRIBUTIONS TO BE SUBMITTED AFTER YOU TURN 65

Art. 29 ter of Law no. 455 amended 27/6/1947

To the Director,

I the undersigned, (surname and first name): .....

Born on ..... of nationality: ..... ID number .....

residing at (full address) .....

Telephone: ..... e-mail address: .....@.....

Hereby declare the information provided below:

- I worked in Monaco as an employee:

- ⇒ for more than 10 calendar years yes [ ] no [ ]
⇒ for more than 60 actual months yes [ ] no [ ]
⇒ for more than 13 months yes [ ] no [ ]

- I ended my last salaried employment in the Principality on .....

- I worked as a self-employed worker in the Principality for the following periods: yes [ ] no [ ]
from: ..... to: .....

To be completed only if you are of French, Italian or Monegasque nationality

- I worked in salaried employment in France yes [ ] no [ ]
- I worked in salaried employment in Italy yes [ ] no [ ]
- I receive a retirement pension paid by the French general social security scheme \*yes [ ] no [ ]
\* attach a photocopy of the award notification and the individual statement of account
- I receive a retirement pension from the Italian old age retirement scheme \*yes [ ] no [ ]
\* attach a photocopy of the award notification and the individual statement of account

I certify the accuracy of the information given above, which shows that, not satisfying the minimum insurance period condition required to entitle me to a retirement pension from the C.A.R., I can only request the reimbursement of the employee share of the contributions paid to this Organisation during my salaried employment in the Principality. As a result, I note the cancellation of the retirement points credited to my account. I have been informed that I can no longer claim this in the event of subsequent salaried employment. Given this situation, I shall waive any future claim to the C.A.R. and acknowledge the perfect settlement of my rights.

Drawn up in ..... on .....

Signature preceded by the words "Read and approved"

COMPULSORY item to be attached to the application:

A photocopy of both sides of your National Identity card

"In accordance with Law no. 1165, as amended, you have the right to access and amend the personal information relating to you. For more information on the processes implemented, you can consult the "Data Protection" section on the www.caisses-sociales.mc website"