



SEGURANÇA SOCIAL

**FAMILY BENEFITS**

**HOUSEHOLD MEMBERS AND INCOME**

**Declaration/Amendment Continuation Sheet**

**DECLARANT'S PERSONAL DETAILS**

Full name												
Date of birth	year	month	day	Social Security Identification Number								

**MEMBERS OF THE HOUSEHOLD (1)**

Order No.	Full name	Social Security Identification Number <sup>(2)</sup>	Family relationship <sup>(3)</sup>	Reason for absence <sup>(4)</sup>	Date of departure <sup>(4)</sup>			Name of foreign country <sup>(4)</sup>
					year	month	day	
<b>7</b>								
<b>8</b>								
<b>9</b>								
<b>10</b>								
<b>11</b>								
<b>12</b>								

- (1) Persons living together as a family unit are considered to be part of the same tax household.  
 (2) If not known, please fill in Form RV1017-DGSS and attach the proof requested.  
 (3) E.g. spouse, father, mother, son, grandfather, son-in-law, daughter-in-law, brother, etc.  
 (4) To be completed if the household member is outside of the country due to illness, work, study or professional training.

**HOUSEHOLD INCOME EARNED IN PORTUGAL**

**Annual earnings from employment not declared to Social Security for the year preceding the year in which the declaration is submitted** (Please fill in the column according to the social welfare system under which you are insured)

Household order No <sup>(1)</sup>	Caixa Geral de Aposentações [General Pensions Fund]	Other social welfare system
<b>7</b>		
<b>8</b>		
<b>9</b>		
<b>10</b>		
<b>11</b>		
<b>12</b>		

(1) Order No of the household member referenced in the table 'MEMBERS OF THE HOUSEHOLD'.

**Pensions not paid by Social Security for the year preceding the year in which the declaration is submitted<sup>(1)</sup>**

Household order No <sup>(2)</sup>	Old-age pension/retirement	Incapacity pension/retirement	Survivor's pension <sup>(3)</sup>	Occupational illness pension	Pension for accident at work	Maintenance allowance	NIF (tax identification number) of paying entity
<b>7</b>							
<b>8</b>							
<b>9</b>							
<b>10</b>							
<b>11</b>							
<b>12</b>							

- (1) **Include** pensions from the Caixa Geral de Aposentações [General Pensions Fund], companies, trade unions, the Caixa de Previdência dos Advogados e Solicitadores [Welfare Fund for Barristers and Solicitors], pension funds, banking institutions, insurance companies, etc.  
 (2) Order No of the household member referenced in **Table 3**.  
 (3) **Include** survivors', widow's, orphans' and similar pensions and temporary or life annuities, pensions payable by insurance companies or pension funds.

**False statements and omissions are punishable by law**

**HOUSEHOLD INCOME EARNED IN PORTUGAL** (continued)**BENEFITS/ALLOWANCES NOT PAID BY SOCIAL SECURITY FOR THE YEAR PRECEDING THE YEAR IN WHICH THE DECLARATION IS SUBMITTED<sup>(1)</sup>**

Household order No <sup>(2)</sup>	Parental	Sickness	Unemployment	Value of housing support <sup>(3)</sup>	Other	NIF (tax identification number) of paying entity
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>11</b>						
<b>12</b>						

**(1) Include** benefits from the Caixa Geral de Aposentações [General Pensions Fund], companies, trade unions, the Caixa de Previdência dos Advogados e Solicitadores [Welfare Fund for Barristers and Solicitors], pension funds, banking institutions, insurance companies, etc.

**(2)** Order No of the household member referenced in the table 'MEMBERS OF THE HOUSEHOLD'.

**(3)** Include household rent subsidies, residence allowances or other public housing support.

**GROSS ANNUAL INCOME EARNED ABROAD FOR THE YEAR PRECEDING THE YEAR IN WHICH THE DECLARATION IS SUBMITTED**

Household order No. <sup>(1)</sup>	Value of income from work		
	Employment	Self-employment	
		Sales	Services
<b>7</b>			
<b>8</b>			
<b>9</b>			
<b>10</b>			
<b>11</b>			
<b>12</b>			

Household order No. <sup>(1)</sup>	Pensions	Social benefits	Capital income	Income from property	Other income
<b>7</b>					
<b>8</b>					
<b>9</b>					
<b>10</b>					
<b>11</b>					
<b>12</b>					

**(1)** Order No of the household member referenced in the table 'MEMBERS OF THE HOUSEHOLD'.

**VALUE OF THE HOUSEHOLD'S MOVEABLE ASSETS ON 31 DECEMBER OF THE YEAR PRECEDING THE YEAR IN WHICH THE DECLARATION IS SUBMITTED**

Household order No. <sup>(1)</sup>	Value of bank account deposits	Value of shares	Value of bonds	Value of savings certificates	Value of securities and units in collective investment undertakings	Value of other financial assets
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>11</b>						
<b>12</b>						

**(1)** Order No of the household member referenced in the table 'MEMBERS OF THE HOUSEHOLD'.

The personal data provided in this application will be processed by the competent Social Security services (Instituto da Segurança Social, I.P., Instituto da Segurança Social dos Açores, I.P.R.A and Instituto de Segurança Social da Madeira, IP-RAM) for the purposes of this form and will be kept for the period strictly necessary to fulfil such purposes.

These Social Security services are committed to protecting your personal data and to fulfilling their obligations within the scope of data protection.

For more information on data protection, please consult the Social Security website at [www.seg-social.pt](http://www.seg-social.pt)