Insured person: Social Security no.:

Your first and last name:

Your social security no. and your date of birth:

Telephone number (for any queries):

Please check as appropriate.

1. Are you currently entitled to receive maintenance payments from your divorced husband / wife? □ yes □ no

2. Do you have gainful employment in Austria? □ yes □ no
   Do you have gainful employment abroad? □ yes □ no
   Are you subject to compulsory health insurance as a result of this employment? □ yes □ no

   Since when? ..... When was the last time?
   .....
   Name, type of occupation and address of employment:
   .....

3. Are you self-employed and do you have income which is subject to income tax pursuant to Articles 22 (1-3 and 5) or Article 23 of the Austrian Income Tax Act (*EStG*)?
   Does your income from this activity exceed EUR 4,988.64 annually (or is it expected to exceed this amount)? □ yes □ no

   If yes, we recommend you contact the Social Insurance Service for Commerce and Industry (*SVA*).

4. Does one or more children live together with you at the same address? □ yes □ no

5. Have you spent at least four consecutive years living together with one or more children at the same address? □ yes □ no

6. Are you / have you ever had voluntary health insurance? □ yes □ no

   From which health insurance provider?
   .....

   Cancelled on .....

9. Are you
   a) an ordinary chamber member of a professional body of doctors? □ yes □ no
   b) a member of a bar association? □ yes □ no
   c) a member of the Austrian Chamber of Pharmacists in the section for self-employed pharmacists? □ yes □ no
   d) a member of the Chamber of Engineers? □ yes □ no
   e) a member of the Austrian Chamber Institute of Patent Agents? □ yes □ no
   f) a member of the Austrian Chamber of Public Accountants? □ yes □ no
   g) a member of the Austrian Chamber of Veterinary Surgeons? □ yes □ no
   h) in receipt of a pension pursuant to the Social Insurance Act for freelance self-employed persons (*FSVG*)? □ yes □ no

i) in receipt of a pension pursuant to the Social Insurance Act for Persons engaged in Trade and Commerce (*GSVG*) due to a professional certification pursuant to the Public Accountants professional rules? □ yes □ no

j) in receipt of a survivor's pension pursuant to the Social Insurance Act for Persons engaged in Trade and Commerce (*GSVG*) pursuant to the Public Accountants professional rules? □ yes □ no

10. Are you subject to compulsory insurance pursuant to the Notary Insurance Act (*NVG*) of 1972 or are they in receipt of a pension pursuant to this law? □ yes □ no

11. Are you in receipt of level 3 care allowance or higher? □ yes □ no

12. Are you in receipt of a pension (retirement pay)? □ yes □ no

Since when?
.....

From which authority (e.g. PVA)? .....

Where do you have health insurance cover?
.....

Has an application for a pension (retirement pay) been made? □ yes □ no

When? ..... From which provider? .....

13. Are you in receipt of unemployment benefit or social support or child care allowance? □ yes □ no

Since when? ..... When was the last time?
.....

From which provider?
.....

Declaration

I hereby confirm that the information provided here is the truth and that I have withheld nothing.

I understand that

- I am only entitled to social insurance cover from my divorced husband / wife if I am ordinarily resident in Austria.
- I will be required to repay any services provided by BVA which were unjustly claimed.

.....
Date and signature