

DECISION No 168
of 11 June 1998
on the amending of forms E 121 and E 127 and the discontinuance of form E 122
(Text with EEA relevance)

(98/443/EC)

THE ADMINISTRATIVE COMMISSION OF THE EUROPEAN COMMUNITIES ON SOCIAL SECURITY FOR MIGRANT WORKERS,

Having regard to Article 81(a) of Council Regulation No 1408/71 of 14 June 1971 on the application of social security schemes to employed persons, to self-employed persons and to members of their family moving within the Community, under which it is the duty of the Administrative Commission to deal with all administrative matters arising from Regulation (EEC) No 1408/71 and subsequent Regulations,

Having regard to Article 2(1) of Council Regulation (EEC) No 574/72 of 21 March 1972, under which it is the duty of the Administrative Commission to draw up models of certificates, certified statements, declarations, applications and other documents necessary for the application of the Regulations,

Having regard to Decision No 153 of 7 October 1993 on the model forms necessary for the application of Council Regulations (EEC) No 1408/71 and (EEC) No 574/72 (E 001, E 103 to E 127),

Having regard to Decision No 170 of 11 June 1998 amending Decision No 141 of 17 October 1989 amending Decision No 127 of 17 October 1985 concerning the compilation of the lists provided for in Article 94(4) and Article 95(4) of Council Regulation (EEC) No 574/72 of 21 March 1972,

Whereas Council Regulation (EC) No 3095/95 of 22 December 1995 amended Regulation (EEC) No 574/72, firstly Article 17(2) and Article 30(1), by limiting to one year the period of validity of form E 122 issued by German, Italian or Portuguese institutions, and secondly Article 95, by replacing the average cost per family by the average cost per person;

Whereas this amendment to Article 95 of Regulation (EEC) No 574/72 will not, however, take effect until 1 January 2002 in the French Republic;

Whereas Council Regulation (EC) No 1223/98 of 4 June 1998 amended Articles 29 and 31 of Regulation (EEC) No 1408/71 and Articles 29, 30, 31, 93 and 95 of Regulation (EEC) No 574/72;

Whereas forms E 121 and E 127 must therefore be adapted and form E 122 discontinued;

Whereas the Agreement on the European Economic Area of 2 May 1992, as amended by the Protocol of 17 March 1993, Annex VI, implements Regulations (EEC) No 1408/71 and (EEC) No 574/72 within the European Economic Area;

Whereas by Decision of the EEA Joint Committee the model forms necessary for the application of Regulations (EEC) No 1408/71 and (EEC) No 574/72 will be adapted and implemented within the European Economic Area;

Whereas for practical reasons identical forms should be used within the Community and within the European Economic Area;

Whereas the language in which forms should be issued is the subject of Recommendation No 15 of the Administrative Commission,

HAS DECIDED AS FOLLOWS:

1. The model forms E 121 and E 127 reproduced in Decision No 153 of 7 October 1993 shall be replaced by the models appended hereto, and the model form E 122 reproduced in the same Decision shall be discontinued.
2. Separate forms E 121 and E 127 shall be filled in for each recipient of a pension or allowance, and for each member of the family of a recipient of a pension or allowance.
3. The competent authorities of the Member States shall make the appended forms available to the persons concerned (rightful claimants, institutions, employers, etc.). However, E 121 forms valid on the date this Decision enters into force shall remain valid until they are invalidated and/or replaced by the new model form E 121 concerning only the recipient of a pension or allowance and thus not the members of their families.
4. Each form shall be available in the official languages of the Community and laid out in such manner that the different versions are perfectly superposable, thereby making it possible for all persons or bodies to whom a form is addressed (rightful claimants, institutions, employers, etc.) to receive the form printed in their own language.
5. This Decision shall be published in the *Official Journal of the European Communities* and shall be applicable as from 1 January 1998. In France, however, it shall not take effect until 1 January 2002.

Peter CLEASBY

*The Chairman of the Administrative
Commission*

**CERTIFICATE FOR THE REGISTRATION OF PENSIONERS OR MEMBERS OF THEIR FAMILIES AND THE
 UPDATING OF LISTS**

*Regulation (EEC) No 1408/71: Article 28.1.a; Article 29.1.a
 Regulation (EEC) No 574/72: Article 29.1, 2 and 3; Article 30.1; Article 95.4*

The institution which has to draw up this certificate in accordance with Article 29.2 or Article 30.1 of Regulation (EEC) No 574/72 should complete Part A of the form and issue two copies to the pensioner or the member of his family, or send them to the institution in the place of residence if the form was requested by the latter institution. If the pensioner or the member of his family resides in the United Kingdom, the two copies of the form should be sent direct to the Department of Social Security, Benefits Agency, Overseas Benefits Directorate, Newcastle-upon-Tyne. Where appropriate, the two copies shall first be sent to the institution which has to complete boxes 6 and 7. The institution in the place of residence should, on receiving the two copies, complete Part B and send one copy to the institution shown in box 7.

A. Notification of entitlement

1.	Institution of the place of residence ⁽²⁾
1.1. Name:
1.2. Address ⁽³⁾ :
1.3. Reference: your E 107 form of

2.	<input type="checkbox"/> Pensioner (scheme for employed persons) <input type="checkbox"/> Pensioner (scheme for self-employed persons)				
2.1. Surname ⁽⁴⁾				
2.2. Forenames	<table style="width: 100%; border: none;"> <tr> <td style="width: 35%; border: none;">Previous names ⁽⁴⁾</td> <td style="width: 30%; border: none;">Date of birth</td> </tr> <tr> <td style="border: none;">.....</td> <td style="border: none;">.....</td> </tr> </table>	Previous names ⁽⁴⁾	Date of birth
Previous names ⁽⁴⁾	Date of birth				
.....				
2.3. Address in the country of residence ⁽³⁾ :				
2.4. Date of transfer of residence, if applicable:				
2.5. Identification number ⁽⁵⁾ :				

3.	To be completed by the institution responsible for payment of the pension
3.1. The person concerned indicated above has been entitled to a pension for	<input type="checkbox"/> old age <input type="checkbox"/> invalidity <input type="checkbox"/> survival <input type="checkbox"/> accident at work <input type="checkbox"/> occupational disease
3.2. since
3.3. Pension No:

4.	Institution which completed box 3 ⁽⁶⁾				
4.1. Name:				
4.2. Address ⁽³⁾ :				
4.3. Stamp	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">4.4. Date</td> <td style="border: none;">.....</td> </tr> <tr> <td style="border: none;">4.5. Signature</td> <td style="border: none;">.....</td> </tr> </table>	4.4. Date	4.5. Signature
4.4. Date				
4.5. Signature				

9.

(10)

9.1. The person concerned indicated in box 2
 The person concerned indicated in box 5
has been registered.

9.2. The costs of these benefits should be borne by you; the date from which the lump sum provided for in Article 95 of Regulation (EEC) No 574/72 should be calculated is

9.3. Code number of the institution of the place of residence (8):

10.

Institution of the place of residence of the pensioner or member of his family

10.1. Name:

10.2. Address (3):

10.3. Stamp

10.4. Date:

10.5. Signature:

INSTRUCTIONS

Please complete this form in block letters, writing on the dotted lines only. It consists of four pages, none of which may be left out even if it does not contain any relevant information. A separate form must be completed for each person to be registered.

Information for the pensioner or member of his family

- (a) You should, as soon as possible, send the two copies of this form to one of the following insurance institutions:
- in **Belgium**, the 'mutualité' (local sickness insurance fund) of your choice
 - in **Denmark**, the local government office at the place of residence
 - in **Germany**, the 'Krankenkasse' (sickness fund) in the place of residence chosen by the person concerned
 - in **Greece**, normally the regional or local branch of the Social Insurance Institute (IKA). The branch office should issue the person concerned with a 'health book', without which no benefits in kind can be provided
 - in **Spain**, the 'Dirección Provincial del Instituto Nacional de la Seguridad Social' (Provincial Directorate of the National Social Security Institution) of the place of residence
 - in **France**, the 'Caisse primaire d'assurance-maladie' (local sickness insurance fund)
 - in **Ireland**, the Health Board in whose area the benefit is claimed
 - in **Italy**, the 'Unità sanitaria locale' (USL, the local health administration unit) responsible for the area concerned
 - in **Luxembourg**, the 'Caisse de maladie des ouvriers' (sickness fund for manual workers)
 - in the **Netherlands**, any sickness fund competent for the place of residence
 - in **Austria**, the 'Gebietskrankenkasse' (Regional Fund for Sickness Insurance) competent for your place of residence
 - in **Portugal for mainland Portugal**: the 'Centro Regional de Segurança Social' (Regional Social Security Centre) of the place of residence; for **Madeira**, the 'Direcção Regional de Segurança Social' (Regional Social Security Directorate) in Funchal; for the **Azores**: 'Direcção Regional de Segurança Social' (Regional Social Security Directorate) in Angra do Heroísmo
 - in **Finland**, the local office of the 'Kansaneläkelaitos' (Social Insurance Institution)
 - in **Sweden**, 'försäkringskassan' (Social Insurance Office) at the place of residence
 - in **Iceland**, the 'Tryggingastofnun Ríkisins' (State Social Security Institution), Reykjavik
 - in **Liechtenstein**, the 'Amt für Volkswirtschaft' (Office of National Economy), Vaduz
 - in **Norway**, the 'lokale Trygdekontor' (local Insurance Office) at the place of residence.
- (b) You must inform the insurance institution to which you submit the form of any change of circumstances which might affect the right to benefits in kind, such as suspension or withdrawal of pension, or change of place of residence, etc.

NOTES

- (*) EEA Agreement on the European Economic Area, Annex VI, Social Security: for the purposes of this Agreement the present form shall also apply to Iceland, Liechtenstein and Norway.
- (1) Symbol of the country to which the institution completing Part A of the form belongs: B = Belgium; DK = Denmark; D = Germany; GR = Greece; E = Spain; F = France; IRL = Ireland; I = Italy; L = Luxembourg; NL = Netherlands; A = Austria; P = Portugal; FIN = Finland; S = Sweden; GB = United Kingdom; IS = Iceland; FL = Liechtenstein; N = Norway.
- (2) Complete only if the form is drawn up at the request of the institution in the place of residence.
- (3) Street, number, post code, town, country.
- (4) In the case of Spanish nationals, state both names at birth.
In the case of Portuguese nationals, state all names (forenames, surname, maiden name) in the order of civil status in which they appear on the identity card or passport.
- (5) For the Italian nationals indicate, if possible, the insurance number and/or the 'codice fiscale'.
- (6) In France, for self-employed persons, the box must be filled in by the institution for sickness and maternity insurance.
- (7) In Italy, boxes 6 and 7 should be completed exclusively by the USL or the Ministry of Health.
- (8) To be completed where this exists.
- (9) If the form issued by a German, French, Italian or Portuguese institution concerns a family member.
- (10) Complete box 8 or 9, where appropriate, and put a cross in the corresponding square.

INDIVIDUAL RECORD OF MONTHLY LUMP-SUM PAYMENTS

Regulation (EEC) No 1408/71: Article 36.1 and 2
Regulation (EEC) No 574/72: Article 94; Article 95

1.	Record No of year	19	(2)
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2.	Competent institution	
2.1.	Name	Code number (4)
2.2.	Address (3)	

3.	The right to benefits in kind has been acquired for the		
	<input type="checkbox"/> employed person	<input type="checkbox"/> pensioner (scheme for employed persons)	
	<input type="checkbox"/> self-employed person	<input type="checkbox"/> pensioner (scheme for self-employed persons)	
3.1.	Surname (5)		
3.2.	Forenames	Previous names (5)	Date of birth
3.3.	Identification number allocated by the competent institution (6):		

4.	This individual record concerns:		
4.1.	<input type="checkbox"/> the family of the worker named in box 3 living at the following address (3):		
4.2.	<input type="checkbox"/> the pensioner named in box 3 living at the following address (3):		
4.3.	<input type="checkbox"/> the following member of the family of the pensioner named in box 3		
4.3.1.	Surname (5):		
4.3.2.	Forenames:	Previous names (5):	Date of birth:
4.3.3.	Address (3):		
4.3.4.	Identification number allocated by the competent institution (6):		

5. The right to benefits of the person(s) named in 4.1 4.2 4.3 was certified by your form
E of

6. For the period during which this right existed
(from to)

6.1. the number of monthly lump-sum payments
 per family (of a worker) per family member per individual
is

7. Institution of the place of residence

7.1. Name: Code number (7):

7.2. Address (3):
.....

7.3. Stamp

7.4. Date:

7.5. Signature:
.....

8. For official use only

Large empty rectangular box for official use only.

INSTRUCTIONS

Please complete three copies of this form in block letters, writing on the dotted lines only. A separate form must be completed for each pensioner and each member of the family of a pensioner.

The institution of the place of residence should draw up the form for one calendar year and send it to the competent institution through the body designated for the implementation of Article 102(2) of Regulation (EEC) No 574/72.

NOTES

- (*) EEA Agreement on the European Economic Area, Annex VI, Social Security: for the purposes of this Agreement the present form shall also apply to Iceland, Liechtenstein and Norway.
 - (1) Symbol of the country to which the institution completing Part A of the form belongs: B = Belgium; DK = Denmark; D = Germany; GR = Greece; E = Spain; F = France; IRL = Ireland; I = Italy; L = Luxembourg; NL = Netherlands; A = Austria; P = Portugal; FIN = Finland; S = Sweden; GB = United Kingdom; IS = Iceland; FL = Liechtenstein; N = Norway.
 - (2) The year to be indicated here is that in which the benefits were provided.
 - (3) Street, number, post code, town, country.
 - (4) To be completed if it is known.
 - (5) In the case of Spanish nationals, state both names at birth.
In the case of Portuguese nationals, state all names (forenames, surname, maiden name) in the order of civil status in which they appear on the identity card or passport.
 - (6) For Italian nationals indicate, if possible, the insurance number and/or the 'codice fiscale'.
 - (7) To be completed where this exists.
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