

Registration card

Request to Send an Informative Personal Record of Pension Insurance



Pursuant to Section 40a of Act No. 582/1991 Coll., on the Organisation and Implementation of Social Security, as amended, I make a request for sending an informative personal record of pension insurance.

A. Basic identification

Family name Forename Family name at birth Czech birth number

B. Address for sending an informative personal record of pension insurance.

Enter the address of permanent residence, or another address to which you wish to send an informative personal record of the pension insurance. If you provide a data box, an informative personal record of pension insurance will be sent to the data box.

Street House number Municipality Postal Code State

Data box ID

C. Date and place, signature

Place Date
claimant's signature

CSSA/DSSA/PSSA/MSSA Brno requires and processes personal data in accordance with legislation for the protection of personal data and only for legitimate purposes. More information can be found at <https://www.cssz.cz/web/cz/gdpr-informace-o-zpracovani-osobnich-udaju>.