

Žádost o zrušení výplaty důchodu poukazem na účet / Request for cancellation of pension payment by remittance to an account



Organizational units of RSSA
(DSSA/PSSA/Brno MSSA)

A. Basic identification – beneficiary (i.e., the pensioner, his/her legal representative, guardian, representative pursuant to Articles 49 and 50 of the Civil Code or a special pension receiver)

Family name	Forename	Degree	Czech birth number
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Street	House number	Municipality	Postal Code
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Warning:

If you are also a receiver of the orphan's pension/pensions for a dependent child/children and if you do not submit also separate request to arrange the payment of his/her/their remittance to the orphans' own accounts or another way, payment of all such pensions arranged to the above address. The child's Czech birth number/children's Czech birth numbers do not need to be entered further in section B.

B. Request for cancellation of pension payment by remittance to a bank account

I request the cancellation of the pension payment by remittance to a bank account on the grounds of

- a) cancellation of an account and arrangement of pension payment to the above address.¹⁾

Prefix	Account number	Bank Code ID	Specific symbol
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

- b) cancellation of the account to which the pension of another person is paid, whose legal representative, guardian, representative pursuant to Articles 49 and 50 of the Civil Code or special pension receiver. Please arrange the payment of the pension to the above address.^{1) 2)}

Prefix	Account number	Bank Code ID	Specific symbol
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

If you are announcing the cancellation of the account as a legal representative, guardian, representative according to § 49 and 50 of the Civil Code, or a special recipient of a pension (excluding orphan's pension/pensions – see **Warning** provided in Section A.), give also Czech birth number, Family name and forename of the pensioner.

Family name of pensioner	Forename of pensioner	Degree	Czech birth number
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

- c) cancellation (restriction) of my rights to use funds on an account of which I am not the owner or cessation of marriage. Please arrange payment of my pension to the above address.^{1) 2)}

- d) death of my spouse — account holder. Please arrange payment of my pension to the above address.^{1) 2)}

Family name of deceased	Forename of deceased	Date of death	Czech birth number
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

- e) death of a pensioner of whom I am the legal representative, guardian, representative pursuant to Articles 49 and 50 of the Civil Code or a special pension receiver.

Family name of deceased	Forename of deceased	Date of death	Czech birth number
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

C. The account owner requests the cancellation of the spouse's pension payment to his/her account

I am requesting the cancellation of my spouse's pension payment to my account on the grounds of

a) his (her) death

Family name of deceased

Forename of deceased

Date of death

Czech birth number

b) cessation of marriage or withdrawal of consent to this method of payment

Family name of spouse

Forename of spouse

Degree

Czech birth number

Warning:

- 1) **This form is not intended for notifying a change of account number.** Such a change must only be reported using the form 'Request for arranging pension payout to the account in the Czech Republic - account owner' or the form 'Request for arranging pension payout to the account of the husband (wife) in the Czech Republic'. **The request for arranging pension payout to the account of the husband (wife) in the Czech Republic must be confirmed by the bank (new bank) or savings and credit union.** When changing the account number, it is advisable to wait until the pension payout to the new account is arranged before canceling the existing account.
- 2) **The costs of CSSA (Czech Social Security Administration) for vouchers of pension installments paid at regular intervals in cash through a holder of a postal license are covered by the pension recipient from January 1, 2010.** However, this does not apply if at least one pension was granted before January 1, 2010, and the entitlement to this pension has been continuous since December 31, 2009 (Section 64(4) of Act No. 155/1995 Coll.).

Information:

Pursuant to the provisions of Article 64(4) of Act No. 155/1995 Coll., as amended, if the beneficiary requests a change in the method of pension payment or a change in the account to which the pension is to be remitted, the pension payer is obliged to carry out such change no later than the pension payment due in the third calendar month after the calendar month in which the request for such change was made; this applies similarly in the case of a request for the payment of a pension to someone other than the current receiver.

Pension instalments to the account already remitted or prepared for remittance in the given month can only be remitted again if they are returned by the bank as an unmade payment.

The CSSA requires and processes personal data in accordance with legal regulations for the protection of personal data and only for legitimate purposes. You can find more information at <https://www.cssz.cz/web/cz/gdpr-informace-o-zpracovani-osobnich-udaju>

The form can be electronically sent to the pension recipient **after logging into the ePortal of CSSA** or **through their personal data box for individuals**, alternatively, the printed **and personally signed form can be delivered to any district branch of the Social Security Administration.**

Place Date

.....
Pension receiver's or account holder's handwritten
signature