



Bundesamt für zentrale Dienste
und offene Vermögensfragen

Bundesamt für zentrale Dienste
und offene Vermögensfragen
53221 Bonn

Application

pursuant to the Ordinance of the Federal Government on a payment to victims of persecution in recognition of work in a ghetto which did not constitute forced labour and which has not been recognized to date under social insurance law

Information on filling in this application form:

In order to allow us to take an appropriate decision regarding your application, we need some important information and documents from you. We therefore kindly ask you to answer all the following questions and enclose documents, if available. If you send documents in German, this may speed up the application procedure since we will not have to get a translation as would otherwise be necessary.

Before you return the questionnaire, we kindly ask you to have your personal details confirmed by an official authority on page 2 and attach a copy of your passport.

Please sign the application as well as the attached contract of assignment.

1. Personal details of the applicant		
name	first name	date of birth
name at birth		place of birth (country)
previous names	divergent spelling, if applicable	
address (street, postal code, place, country)		
nationality		
2. Submission of the application by a third party		
The application is by proxy filed by		
name	first name	official agency (file no, if applicable)
address (street, postal code, place, country)		
in the capacity of Please enclose power of attorney or guardianship court order.		
<input type="checkbox"/> legal representative	<input type="checkbox"/> guardian	<input type="checkbox"/> carer <input type="checkbox"/> attorney

Confirmation by an official authority	
(e.g.: all authorities of the country of residence, notaries, banks, hospitals, Red Cross as well as embassies and consulates of the Federal Republic of Germany)	
The applicant is alive. The personal details were confirmed by:	
identification document	number
<input type="checkbox"/> identity card	
<input type="checkbox"/> passport	
<input type="checkbox"/> other documents (birth or marriage certificate or certificate of descent/parentage)	
place, date	seal of official authority and signature

3. Information on prosecution

3.1 Have you been recognized as a persecuted person within the meaning of § 1 Federal Indemnification Law (BEG)?

- | | |
|--|-----------|
| <input type="checkbox"/> yes, by | reference |
| <input type="checkbox"/> a Federal State authority (BEG) | |
| <input type="checkbox"/> the Federal Ministry of Finance | |
| <input type="checkbox"/> the Jewish Claims Conference | |
| <input type="checkbox"/> other authorities (please indicate which) | |

please continue with section 4

Please enclose the administrative decision(s)

no,

please also complete sections 3.2 to 3.4

3.2 Place of domicile/residence during the persecution period:

address (place, district)	country	Since when?

3.3 Reason for persecution, emigration or injustice that was suffered:

- political reasons
- parentage
- religion
- nationality
- other: _____

3.4 Short description of persecution history indicating places and periods:

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4. Information regarding work in the ghetto				
4.1 In which ghetto did you live?				
	ghetto (place, district, area/country)	residence	from - to	
4.2 Did you work while you were living in the ghetto?				
	<input type="checkbox"/> no	<input type="checkbox"/> yes, from - to (period)	at (place of work/employer)	as (type of work)
4.3 Did you also work outside the ghetto?				
	<input type="checkbox"/> no	<input type="checkbox"/> yes, from - to (period)	at (place of work/employer)	as (type of work)
4.4 How did you get this work inside or outside of the ghetto?				
<input type="checkbox"/> I found the work myself. <input type="checkbox"/> I was placed in this job on demand (please indicate who referred you, if applicable). <input type="checkbox"/> I was forced to do the work (please indicate who ordered you to do the work, if applicable).				
4.5 Do you still have documents regarding the stay and work in the ghetto?				
<input type="checkbox"/> no <input type="checkbox"/> yes, please enclose the documents!				

5. Information regarding other benefits		
5.1 Are you in receipt of a pension from the German statutory pension insurance system or have you applied for such a pension?		
<input type="checkbox"/> no	<input type="checkbox"/> yes, name of the insurance institution	insurance number
5.2 Does another – foreign – pension insurance institution pay a pension for these working periods in the ghetto or have you applied for such a pension?		
<input type="checkbox"/> no	<input type="checkbox"/> yes, country, name of the insurance institution	insurance number
Please enclose the pension award letter		
5.3 Did you receive a compensatory payment from the Foundation „Remembrance, Responsibility and the Future“ or have you applied for such a benefit?		
<input type="checkbox"/> no	<input type="checkbox"/> yes, file reference	
Please enclose the decision letter		

6. Bank details (Please indicate the details of your own bank account. The payment cannot be made to third parties.)		
account no.:	bank code:	name of the banking institution:
BIC: IBAN:		
account holder:		

7. Declaration:

I hereby declare in lieu of an oath that the information given above and the enclosed information are correct.

I am aware of the fact that my application will be rejected and that payments I have already received will be claimed back if wrong information was given deliberately.

I know that there is no legal claim to this payment.

8. Declaration of consent:

In order to determine if the qualifying conditions for the payment in recognition of ghetto work are fulfilled, it might be necessary to obtain information from German pension insurance institutions, foreign pension insurance institutions and compensation authorities.

I hereby give my consent that the Federal Office for Central Services and Unresolved Property Issues may request information for this purpose and to the extent that is necessary for dealing with this claim from the agencies and authorities which are listed in section 3.1 and sections 5.1 to 5.3 and – if it should be necessary in particular cases– that they obtain access to the records.

I give my consent that the German pension insurance institutions, the foreign pension insurance institutions and the compensation authorities transfer the required information to the Federal Office for Central Services and Unresolved Property Issues and that they let this office have access to the files if it should be necessary in particular cases.

We would like to advise you that it may be impossible to determine if the qualifying conditions for this payment have been fulfilled without this consent.

place

date

personal signature

Enclosures:

Contract of assignment

Copy of a valid identification document

Other:



CONTRACT OF ASSIGNMENT

between

- applicant -

and

Bundesamt für zentrale Dienste und offene Vermögensfragen

(Federal Office for Central Services and Unresolved Property Issues)

- BADV -

- 1) The BADV is entitled to a refund of the benefits that the applicant has received in accordance with § 1 para. 2 of the ordinance¹, if a revision in accordance with § 44 of the Tenth Book of the German Social Code (SGB X) leads to a revocation of the rejection decision of the pension insurance institution concerning the recognition of contribution periods under the Law regarding the conditions for making pensions payable on the basis of employment in a ghetto (ZRBG) or if an application gives rise to a pension entitlement. The claim becomes due when the ruling on the pension application is notified.
- 2) In order to secure this repayment claim, the applicant assigns to the BADV the respective seizable part of his/her monthly pension entitlement from the German statutory pension insurance in accordance with § 53 of the First Book of the German Social Code (SGB I), viz. in the order of their accrual up to the maximum amount of 2.000 €.
- 3) The BADV is only authorized to realize the assigned claims if the repayments by the applicant are delayed and on the condition that a reasonable deadline for the repayment had been announced in writing by the BADV on pain of realizing the claim when this deadline has expired without the repayment having been received.

place

date

Applicant

BADV

¹ Ordinance of the Federal Government on a payment to victims of persecution in recognition of work in a ghetto which did not constitute forced labour and has not been recognized to date under social insurance law.