



Versicherungsanstalt öffentlich Bediensteter

Insured person: Social Security no.:

First and last name of the partner / housekeeper:

Social security no. and date of birth of the partner / housekeeper:

Marital status: Single, married, widowed, divorced

Please check as appropriate.

1. Are you related to the housekeeper either directly or through marriage? yes no

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If yes, please provide details:

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2. How long has the partner / housekeeper been living with you at your address?
(evidence required (residential registration form = *Meldezettel*))

3. How long have they been in charge of the household?

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4. Do they receive financial compensation? yes no

5. Are there any children currently living at the same address? yes no

6. Has your partner / housekeeper spent at least four consecutive years living together with one or more children at the same address? yes no

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

If yes, are you cared for by the partner / housekeeper? yes no

8. Does your partner / housekeeper have gainful employment in Austria? yes no

Does your partner / housekeeper have gainful employment abroad? yes no

Are they 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:

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9. Is your partner / housekeeper in receipt of a pension (retirement pay)? yes no
- Since when?
- From which authority (e.g. PVA)?
- Where do they have health insurance cover?.....
10. Does your / has your partner / housekeeper have / had voluntary health insurance? yes no
- From which health insurance provider?
- Cancelled on
11. Is your partner / housekeeper self-employed and has 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*)? yes no
- Does their income from this activity exceed EUR 5,361.72 annually (or is it expected to exceed this amount)? yes no
- If yes, we recommend your partner / housekeeper contact the Social Insurance Service for Commerce and Industry (SVA).
12. Is your partner / housekeeper
- 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
13. Is your partner / housekeeper 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
14. Is there a husband or wife living in the same house who is fit to work? yes no
15. Is your partner/housekeeper in receipt of unemployment benefit, social support or child care allowance? yes no
- Since when? When did it stop?
- From which provider?

16. Other information:

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Declaration

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

I understand that

- my partner / housekeeper is only entitled to make claims through my social insurance if they are ordinarily resident in Austria.
- The person who was not entitled to receive benefits will be required to repay any services provided by BVA which were unjustly claimed.

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Date and signature