APPLICATION FOR SURVIVORSHIP BENEFIT

(Please Read Terms and Conditions and Documentary Requirements at the back)

Form No. 03102014-AFS

INSTRUCTIONS: Ensure that the application form is properly filled out and submit duly accomplished application form to the nearest GSIS/Handling Office.

WARNING: Direct or indirect commission of fraud, collusion, falsification, misrepresentation of facts, or any other kind of anomaly in the accomplishment of this form, or in obtaining any benefit under this application shall be subject to administrative, civil and/or criminal action.

Must be received by GSIS within four (4) years from the date of death of deceased member/pensioner together with the required supporting documents.

DATE OF FILING OF APPLICATION _____

A. DECEASED MEMBER/RETIREEE/PENSIONER

Last Name	First Name	Middle Name	GSIS Business Partner (BP) No.

Name and Address of Last Government Office	Date of Birth (mm/dd/yyyy)

Civil Status	Gender	Status at the time of death	Retirement/Separation Benefits
☐ Married ☐ Single ☐ Separated ☐ Widow/Widower	☐ Male ☐ Female **Religion**	☐ Active Member ☐ Retiree ☐ Pensioner	☐ RA 660 ☐ RA 1616 ☐ PD 1146 ☐ RA 8291

B. PRIMARY BENEFICIARIES (LIVING)

I. Legal Spouse

Last Name	First Name	Middle Name	BP No. (if applicable)

Mailing Address (No/Street/Barangay/Municipality/City/Province/Zip Code)	Date of Marriage(mm/dd/yyyy)

Date of Birth (mm/dd/yyyy)	Religion	Cellphone No.	Email Address

II. Dependent Children (minors and incapacitated):Please indicate status (i.e., legitimate, legally adopted, acknowledged, illegitimate)

Name	Date of Birth	Mailing Address	Status	With Incapacity
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No

C. SECONDARY BENEFICIARIES (LIVING) – In the absence of primary beneficiaries

I. Legitimate Descendants/Legal Heirs (i.e. children of legal age, parents, siblings, grandchildren)

Name	Date of Birth	Mailing Address	Status	With Incapacity
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No

II. Guardian of Surviving Dependents:

Last Name	First Name	Middle Name	BP No. (if applicable)
Date of Birth(mm/dd/yyyy)	Contact No./Cellphone No.	Email Address	Relationship to the dependent children
Mailing Address (No/Street/Barangay/Municipality/City/Province/Zip Code)			

D. CLAIMANT IS OTHER THAN SPOUSE – (For funeral benefit only)

Last Name	First Name	Middle Name	BP No. (if applicable)
Date of Birth (mm/dd/yyyy)	Place of Birth	Cellphone No.	Email Address
Mailing Address (No/Street/Barangay/Municipality/City/Province/Zip Code)			

Upon filing of this application, it is understood that I have previously secured a tentative computation of the amount of benefits I will receive including the amount deducted from the proceeds in payment of the deceased member's unpaid obligations with GSIS and I fully conform to the same.

I hereby certify that the foregoing information are true and correct and the attached documents are authentic.

_____
Signature of Applicant over Printed Name

Thumbmark
(if unable to affix signature)

Witnesses to thumbmark:

1. _____

2. _____

Claim proceeds shall be electronically credited to your eCard/UMID account and may be withdrawn from your nearest ATM. If you have no eCard/UMID, the proceeds will be paid through check.

TO BE FILLED OUT BY HEAD OF AGENCY OR HIS AUTHORIZED ENDORSING OFFICER

1st Endorsement

Respectfully forwarded to GSIS this application for survivorship benefit with our recommendation for approval.

It is hereby certified that the late member Mr./Ms./Mrs. _____

1. last day of actual service was be rendered on _____.
2. ☐ had no / ☐ had an administrative and/or criminal case pending at _____.

Office Name

_____

_____
Signature over Printed Name of the Head of Agency
or his Authorized Endorsing Officer

Office Address

Date: _____

_____

Application Received By: _____

Date Received: _____

TMS Reference No.: _____

TERMS AND CONDITIONS

SURVIVORSHIP BENEFITS

When a member or pensioner dies, the beneficiaries shall be entitled to the following survivorship benefits, whichever is applicable:

1. Survivorship pension consisting of:
   a. the basic survivorship pension which is fifty percent (50%) of the Basic Monthly Pension (BMP); and
   b. the dependent children's pension equivalent to 10% of the BMP for each child but not to exceed fifty percent (50%) of the BMP.

2. Cash payment equivalent to eighteen (18) months BMP;

3. Cash payment equivalent to one hundred percent (100%) of the AMC for every year of service with paid contributions but not less than Twelve Thousand Pesos (P12,000.00).

I. Survivorship Benefits of Members in Active Service.

1. If at the time of death, a member was in the service and has rendered at least fifteen (15) years of creditable service:

   a. his primary beneficiaries shall receive the survivorship pension and cash payment equivalent to 18 x the BMP; or
   b. in the absence of primary beneficiaries, his secondary beneficiaries shall receive the cash payment equivalent to 18 x the BMP; or
   c. in the absence of secondary beneficiaries, the legal heirs shall receive the cash payment equivalent to 18 x the BMP.

2. If at the time of death, the member was in the service with less than fifteen (15) years of creditable service; his primary beneficiaries shall receive the cash payment equivalent to 100% of the AMC for every year of creditable service.

II. Survivorship Benefits of Inactive Members

Primary beneficiaries of inactive members who have at least 15 years of creditable service shall receive the survivorship pension only.

   a. Primary beneficiaries of inactive members who have at least 3 years but less than 15 years of creditable service and were less than 60 years old at the time of death shall receive the cash payment equivalent to 100% of the AMC for every year of creditable service, but not less than P12,000.00.

   b. Primary beneficiaries of inactive members who have less than 15 years of creditable service but were at least 60 years old at the time of separation and have received the corresponding separation benefit, shall not be entitled to survivorship benefits. However, if the member has not received yet his separation benefit within four years after his/her separation, the primary beneficiaries shall receive the cash benefit equivalent to 100% of the inactive member's AMC for every year of creditable service, but not less than P12,000.00.

III. Payment of Survivorship Benefits

The survivorship benefits shall be paid as follows:

a. When the dependent spouse is the only survivor, he shall receive the basic survivorship pension;
b. When only the dependent children are the survivors, they shall be entitled only to the dependent children's pension equivalent to 10% of the BMP for every dependent child, not exceeding five (5), counted from the youngest and without substitution;
c. When the survivors are the dependent spouse and the dependent children, the dependent spouse shall receive the basic survivorship pension for life or until he remarries or cohabits, and the dependent children shall receive the dependent children's pension.
d. When the dependent spouse and dependent children are already receiving the basic survivorship pension and dependent children's pension, respectively, any subsequent death, emancipation or disqualification of any one of them shall not entitle the other beneficiaries to the forfeited share.
e. In the absence of a natural guardian, the guardian de facto of dependent children, as well as the physically or mentally incapacitated dependent children, must file a Petition for Guardianship to be able to claim the survivorship benefits on behalf of the dependent children.
f. When the pensioner dies within the 5-year period after receiving the five-year lump sum, the survivorship pension shall be paid only after the end of the said five-year period. However, filing of claim for survivorship benefit should be done before the end of the 4-year prescription period.

IV. Conditions for Entitlement to Survivorship Benefits

The primary and secondary beneficiaries, except dependent children, shall be entitled to applicable survivorship benefits, subject to the following:

a. the surviving spouse and the deceased member were living together as husband and wife;
b. in the case of the dependent spouse, payment of the basic survivorship pension shall discontinue when he remarries, cohabits, or engages in common-law relationship.

The foregoing conditions, except the last one, must be present immediately preceding the death of the member or pensioner.