

## Parental insurance

### B-wage earner

As a B-wage earner, the main requirement for receiving parental benefits is taking out parental insurance. The insurance terms and a guide to help you through each question can be found towards the end of this application form.

Please write in block letters.

#### 1. Applicant

Name:	P-tal:
Street and no.:	PO box:
Postcode and town:	Telephone:
E-mail:	Mobile no.:

#### 2. Employer details

Name:	V-tal:
Street and no.:	PO box:
Postcode and town:	Telephone:
Guarantor:	
E-mail of guarantor:	
Country of work:	
Work commencement date of applicant (day/month/year):	

#### 3. Confirmation from employer

I certify that the applicant is only entitled to parental benefits from the Faroe Islands during the time the applicant works for us.

I understand that I am obliged to report any change of circumstance that might affect the parental benefit.

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Date

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Signature and stamp  
*(In the absence of a stamp, please state the signee's first and last name, in capital letters, above the signature)*

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**4. Other information**


**5. Confirmation from applicant**

I hereby give Barsilsskipanin permission to obtain relevant information about me, including information from TAKS. I understand that I am obliged to report any change in circumstance that might affect the parental benefit to Barsilsskipanin.

I certify that the information given in this form is accurate.

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Date

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Signature

**The main requirements for taking out parental insurance are that you:**

- live in the Faroe Islands,
- have full tax liability in the Faroe Islands,
- have a B-income according to § 61 of the Faroese Tax Act and that the income has been earned in a Nordic country.

The insurance premium is 3000 DKK annually. You could be covered, at the earliest, the day Barsilsskipanin receives your application, but you must have been covered for at least one year before you can receive any payments.

The allowance is based on the average B-income over the last 12 months before the parental leave. This has to be documented with pay slips.

The allowance cannot be more than 30,000 DKK per month.

**Legal framework**

Parental Leave Act passed by Løgting (Faroese parliament) the 3<sup>rd</sup> of April 2001. Order on the voluntary parental benefit insurance premium from the 30<sup>th</sup> of August 2021. Order on Barsilsskipanin's board of appeals from the 14<sup>th</sup> of June 2004.

## Guide to each question

### 1. Applicant

Enter the applicant's name, p-tal (civil registration number), address and the like.

### 2. Employer details

Enter the employer's name, v-tal (VAT-number) and address. Please also state in which country the work is carried out and the date when the applicant started working for this employer.

### 3. Confirmation from employer

Here the employer certifies that the applicant is not entitled to parental benefits from another country while the applicant works for this employer.

### 4. Other information

Enter any additional information that may be relevant here.

### 5. Confirmation from applicant

This field is for the applicant to confirm that the information given in this form is accurate and that s/he is obliged to report any change in circumstance that may affect the parental benefit. Furthermore, the applicant gives Barsilsskipanin permission to obtain relevant information from TAKS.

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Please fill out this form carefully. If required information or documents are missing, Barsilsskipanin will notify you. In this case, the missing information must be sent to Barsilsskipanin within 14 days of receiving the notice. If you fail to respond in this time, the application will be cancelled. If you withhold information or provide incorrect information, Barsilsskipanin will demand that you repay the received allowance and you could be fined or receive a mitigated punishment. The information given in the form may be checked under the provisions of § 21 of the Parental Benefits Act of the 3rd of April 2001.

Read more about parental benefits on Barsilsskipanin's website [www.barsil.fo/en](http://www.barsil.fo/en)

### **This application form can contain sensitive information, so keep safety in mind**

Submit the application form to TAKS via Mínboks or by other secure means.

TAKS, Postboks 2151, 110 Tórshavn, tel. 35 26 00, [barsil@taks.fo](mailto:barsil@taks.fo).