



Surviving Relative Benefit Application Form

Has any of your close relatives become a victim of an intentional violent offence or of involuntary manslaughter in the Netherlands after 1972? And has this relative died as a result?

Then you may be eligible for a payment from the Violent Crimes Compensation Fund. You can use this form to apply for it.

If the deceased victim is not your relative, but you have paid for the funeral or cremation, then you can use this form to apply for allowance for these costs.

Application in three steps

1. Fill in the form completely and truthfully. Read the explanation on page 5 carefully.
2. Add a copy of your proof of identity and the supporting documents.
3. Send everything to:

Schadefonds Geweldsmisdrijven
Antwoordnummer 91052
2509 VC Den Haag

Do you have any questions?

You can contact the Compensation Fund or go to www.schadefonds.nl.

T 070 – 414 20 00

E info@schadefonds.nl

Do you need help with completing the form?

Victim Support Netherlands will help you free of charge. You can reach it on telephone number 0900–0101 or via www.slachtofferhulp.nl.

Recognition gives strength Together involved

1A Surviving relative

Fill in the details of the surviving relative for whom the compensation is applied for.

► Please enclose (obligatory): a copy of the surviving relative's identity document

A.1	What was your relation with the victim? I was his/her	<input type="checkbox"/> parent	<input type="checkbox"/> spouse	<input type="checkbox"/> registered partner	
		<input type="checkbox"/> child	<input type="checkbox"/> sibling	<input type="checkbox"/> other, namely	
		gender			
A.2	Family name				<input type="checkbox"/> m <input type="checkbox"/> f
A.3	First name(s)				
A.4	Date of birth				
A.5	Citizen Service Number				
A.6	Street and house number				
A.7	Postcode and city/town				
A.8	Telephone number(s)				

Please do not write here.

A.9 When is the best time we can reach you from Monday up to and including Friday during ?

A.10 E-mail

A.11 IBAN for payment of the compensation ▶ Please enclose: a copy of your bank card

A.12 In the name of

When you fill in your telephone number or e-mail address, we assume that we can contact you in this way.

1B Legal representative

If the surviving relative is a minor or has been placed under guardianship, the legal representative must fill in his/her details here.

B.1 What is your relation with the surviving relative?
☐ Parent ▶ Please enclose (obligatory): a copy of the parent's identity document
☐ Guardian ▶ Please enclose (obligatory): copies of the identity document and the guardianship order
☐ Administrator ▶ Please enclose (obligatory): copies of the identity document and the administration order

B.2 Family name
 _____ gender ☐ m ☐ f

B.3 First name(s)

B.4 Street and house number

B.5 Postcode and city/town

B.6 Telephone number(s)

B.7 E-mail

2 Authorised representative

If someone acts on your behalf in the application procedure, this person must fill in his/her details here.

2.1 Family name
 _____ gender ☐ m ☐ f

2.2 First name(s)

2.3 Name of the organisation

2.4 Street and house number

2.5 Postcode and city/town

2.6 Telephone number(s)

2.7 E-mail

3 Who is the victim?

Please fill in the details of the person who died as a result of the crime here.

		gender
3.1 Family name		<input type="checkbox"/> m <input type="checkbox"/> f
3.2 First name(s)		
3.3 Date of birth		
3.4 Date of death		
3.5 Citizen Service Number		

4 What happened?

Do you need additional writing space? Please find an additional sheet for this purpose in the back.

4.1 As a result of which crime did the victim die?	<input type="checkbox"/> Murder/manslaughter
	<input type="checkbox"/> Death by involuntary manslaughter (in traffic)
	<input type="checkbox"/> Other, namely
4.2 Where was the crime committed?	
4.3 On what date was the crime committed?	
4.4 Is (or was) the suspect prosecuted?	<input type="checkbox"/> Yes ▶ Go to question 4.5
	<input type="checkbox"/> No ▶ Was the case dismissed or closed? Please fill in the official report number and/or the public prosecutor's office no. below.
4.5 Official report number	
	Public Prosecutor's Office number
4.6 Details of the criminal proceedings	

If you have the official report and/or the judgment, please enclose this/these document(s).

5 Funeral expenses and reduced income?

Funeral expenses

5.1 Did you incur expenses for the funeral?	<input type="checkbox"/> Yes, namely €
	<input type="checkbox"/> No ▶ Go to question 5.3
5.2 Did you receive compensation for these expenses?	<input type="checkbox"/> Yes, namely € Paid by:
	<input type="checkbox"/> No ▶ Go to question 5.3

Reduced family income

- 5.3 Did you depend on the deceased person's income?
- ☐ Yes ▶ [Go to question 5.4](#)
- ☐ No ▶ [Go to question 6](#)
-
- 5.4 Did you suffer any loss because the deceased person's income stopped?
- ☐ Yes
- ☐ No ▶ [Go to question 6](#)
-
- 5.5 Did you receive any compensation for this loss?
- ☐ Yes, namely | € | Paid by:
- ☐ No ▶ [Go to question 6](#)

▶ *Please enclose evidence, such as payslips or annual income statements, which show the average income of the deceased person and surviving spouse or partner*

6 Damages

▶ *Please enclose evidence, such as payslips or annual income statements, which show the average income of the deceased person and surviving spouse or partner.*

- 6.1 Did you receive compensation for damages, for example, from the offender, an insurance company or the guarantee (Waarborgfonds)?
- ☐ No
- ☐ Yes, for my distress | € | Paid by:
- ☐ Yes, for costs of therapy | € | Paid by:
- ☐ Yes, for incapacity for work | € | Paid by:
- ☐ Yes, for other | € | Paid by:

7 Existence of Compensation Fund

- 7.1 How did you learn of the existence of the Compensation Fund?
- ☐ Victim Support Netherlands ☐ Legal expenses insurance
- ☐ Police ☐ Public Prosecution Service
- ☐ Lawyer ☐ Slachtofferwijzer
- ☐ Family doctor ☐ Healthcare provider (e.g. psychologist, psychiatrist)
- ☐ Other, namely

8 Signature

Attention! If the surviving relative is a minor or placed under guardianship, the legal representative must sign this form.

I have completed this form truthfully.

- 8.1 Date and city/town | | | | | | | | | |
- 8.2 Name | | | | | | | | | |
- 8.3 Signature

Please print out the form to sign it

| | | | | | | | | |

Explanation to the Surviving Relative Benefit Application Form

General information

What is the Violent Crimes Compensation Fund?

The Violent Crimes Compensation Fund is an independent part of the central government. It provides one-off benefits to victims of intentional violent crimes who have suffered serious physical or psychological injury as a result. Survivors of victims who died due to a violent crime or involuntary manslaughter can also receive compensation from the Compensation Fund. This also applies to relatives of the victims who have sustained serious and permanent injury as a result of a violent crime.

What are examples of violent crimes?

Assault, robbery, murder or manslaughter.

What is involuntary manslaughter?

Death through culpable negligence in traffic (Article 6 of the Road Traffic Act 1994) or involuntary manslaughter in a general sense (Article 307 of the Criminal Code).

What is a relative?

The definition is given in Article 3, paragraph 2 of the Violent Crimes Compensation Fund Act. A relative is in any case your spouse, registered partner, parent, (adopted) child, brother or sister.

What is the benefit intended for?

The benefit is a social expression of solidarity and a token of recognition of the suffering that has happened to a surviving relative. It is paid from tax money and is not intended to cover all damage. The benefit is intended to restore some of the damaged confidence and to help the surviving relative (financially) so that he/she can focus on the future. The recipient is free to use it.

How does the Compensation Fund determine the amount of the benefit?

The allowance always consists of a fixed amount of € 5,000 for the suffering of the relative and possibly financial damage suffered. Consider, for example, therapy costs or a reduction in income. This benefit can be supplemented with separate allowances for funeral expenses and reduced family income. This damage must be demonstrated with proof, such as invoices, insurance specifications, payslips or annual statements.

Are you a victim of a crime and do you have serious physical or psychological injuries as a result?

Then you can apply for a benefit using the 'Victim benefit application form'. You can find this form on www.schadefonds.nl. Have any of your relatives suffered a serious and permanent injury as a result of a violent crime? Then you can request a benefit using the 'Relative benefit application form'. You can find this form on www.schadefonds.nl.

Submission deadline

The Compensation Fund will process an application if it is submitted within ten years after the death of the victim. An application submitted later, can still be processed by the Compensation Fund if a valid reason is given for this.

Information per question on this form

1A Surviving relative

Please enter the details of the surviving relative for whom the benefit is being requested. Also state your IBAN (bank account number) on which the Compensation Fund can transfer a benefit.

Pay attention! Do not give the details of a savings account.

1B Legal representative

If the surviving relative is a minor or under guardianship, the legal representative should enter his/her details here. A legal representative is a parent, guardian or receiver of the victim.

2 Authorised representative

If you want someone else to act on your behalf during the application procedure, you can authorise someone, for example an employee of Victim Support Netherlands or a family member.

3 Who is the victim?

Enter the details of the person who has died as a result of crime.

4 What happened?

In this section you provide information about the violent crime or death due to a culpable offence (involuntary manslaughter) and the possible criminal case against the suspect / offender. The Compensation Fund needs information about a criminal case in order to better assess your application. If you provide more information, the Compensation Fund can assess your application faster and better. **Pay attention!** The Compensation Fund never contacts the perpetrator / suspect.

5 Funeral costs and less income?

If you are eligible for a benefit, you will always receive a fixed amount of € 5,000 for your suffering and possible financial damage that you have suffered. In addition, you can request an additional payment for two separate damage costs: funeral expenses and less family income.

Funeral costs

Have you incurred costs for the funeral or cremation of the deceased? Then you can specify them. If you have received reimbursements for these costs, you should state them as well. Demonstrate the costs and possible reimbursements as much as possible with invoices and insurance specifications.

Less family income

Were you dependent on the income of the deceased and are you now suffering damage as a result of the loss of his/her income? Then you can specify this. Please enclose proof that shows the average income of the deceased and the surviving partner.

6 Compensation

The Compensation Fund only provides compensation for the damage that has not been compensated. Have you received compensation from, for example, the offender, an insurer or the Motor Traffic Guarantee Fund? Then you must specify this. Please enclose proof of the compensation showing amount you have received and for what damage. The Compensation Fund will then decide whether this compensation will be deducted from a possible benefit.

If you receive compensation after you have received a payment from the Compensation Fund, it is important that you inform the Compensation Fund about it. The Compensation Fund will then determine whether it should be set off against the payment.

7 Existence of the Compensation Fund

Please specify here how you came to know about the existence of the Compensation Fund.

If you want to say more about the violent crime or death due to a culpable offence or the consequences thereof, you can use the supplement sheet for this purpose.

Supplementary information

Were you short of space when completing the form? Then you can use this sheet to complete your answer.

Please refer to the number of the question that the answer belongs to.

Question no.	Addition
--------------	----------

[illegible]