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| Indienen betaalverzoek voor betaald ouderschapsverlof | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Voor uw werknemer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | Invullen door UWV | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  |  | | | | Formuliercode | | | | |  | | |  | | | | | |  | | | Volgnummer | | | | | | | | | | | |  |  | | | | | |  | | |
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|  | | | | | **Waarom dit formulier?**  Met dit formulier dient u als werkgever een betaalverzoek voor betaald ouderschapsverlof van uw werknemer in. Wij laten u binnen 4 weken weten of uw werknemer deze uitkering krijgt.  **Opsturen** Stuur het formulier naar:  UWV Ziektewet  Postbus 57015  1040 CT AMSTERDAM | | | | | | | | | | | | | |  | | | | **Betaalverzoek online doorgeven**  U kunt een betaalverzoek ook online doorgeven via de Verzuimmelder op het werkgeversportaal van UWV. Gebruikt u Digipoort? Geef dan het betaalverzoek door via uw eigen loonadministratie die gekoppeld is aan onze database.  **Meer informatie**  U vindt meer informatie op uwv.nl. U kunt ook bellen met  UWV Telefoon Werkgevers via 088 – 898 92 95 (lokaal tarief – belkosten zijn afhankelijk van uw telefoonaanbieder). Als u belt, houd dan uw loonheffingennummer en het burgerservicenummer van de werknemer bij de hand. Wij kunnen u dan sneller helpen. | | | | | | | | | | | | | | | | | |  | | |
|  |  | | | | Invullen door werkgever | | 1 | | |  | | | Gegevens werknemer | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 1.1 | | | | | Burgerservicenummer | | | | |  | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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| 1.2 | | | | | Achternaam | | | | |  | | | *Gebruikt de werknemer de achternaam van de partner, vul dan ook de geboortenaam in.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 1.3 | | | | | Ingangsdatum eerste verlof | | | | |  | | | *Vul hier de ingangsdatum in van de eerste aanvraag.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | | | |  | | | 2 | | |  | | | Gegevens werkgever | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | | | |  | | | | | |  | | | *Als uw bedrijf gestart is op of na 1 januari 2020 hoeft u de risicopremiegroep niet in te vullen.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 2.1 | | | | Loonheffingennummer, sector OSV en risicopremiegroep | | | | | |  | | | Loonheffingennummer | | | | | | | | | | | |  | | | Sector OSV | | |  | Risicopremiegroep | | | | | | | | |  | | |
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|  | | | Aansluitingsnummer | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |  | | |
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| 2.2 | | | | Nummer lokale vestiging | | | | | |  | | | *Alleen invullen als het gaat om een zieke uitzendkracht.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 2.3 | | | | Contactpersoon | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | |  | Man | Vrouw | | |  | | |
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| 2.4 | | | | Telefoonnummer contactpersoon | | | | | |  | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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|  | | | |  | | | 3 | | |  | | | Gegevens betaalverzoek | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 3.1 | | | | Ingangsdatum vervolgverlof | | | | | |  | | |  | | | | | | | | | | | |  | *Vul hier de ingangsdatum in van het verlof waarvoor u dit betaalverzoek indient.* | | | | | | | | | | | | | | |  | | |
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| 3.2 | | | | Aantal weken betaald ouderschapsverlof | | | | | |  | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
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| 3.3 | | | | Verklaring opname betaald ouderschapsverlof | | | | | |  | | | Ja, het betaald ouderschapsverlof is opgenomen. | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 3.4 | | | Is het dienstverband tijdens het verlof geëindigd? | | | | | |  | | | Nee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | Ja⏵ | | | | | Dienstverband is geëindigd per: | | | | | | | | | | |  | | | | | | | | | | |  | | | |  |
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|  | | | |  | | | 4 | | |  | | | Betaling betaalverzoek | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 4.1 | | | | Wilt u dat wij de uitkering rechtstreeks aan uw werknemer betalen? | | | | | |  | | | Nee ⏵*U hoeft uw rekeningnummer alleen in te vullen als u denkt dat het nog niet bij ons bekend is. Vul dan 1 rekeningnummer in: uw Nederlandse of buitenlandse rekeningnummer.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | | | |  | | | | | |  | | |  | | | BIC *Unieke code van de bank* | | | | | | | | | | | | | |  | | | | | | | | | | |  | | |
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|  | | | |  | | | | | |  | | |  | | | Naam van de bank | | | | | | | | | | | | | |  | | | | | | | | | | |  | | |
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|  | | | |  | | | | | |  | | |  | | | Vestigingsplaats van de bank | | | | | | | | | | | | | |  | | | | | | | | | | |  | | |
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|  | | | |  | | | | | |  | | | Ja ⏵ *Vul 1 rekeningnummer in: het Nederlandse of buitenlandse rekeningnummer.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | |  | | | | 5 | |  | | | Gegevens belastingheffing/loonheffingskorting | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | |  | | | | | | |  | | | *Vul dit alleen in als de uitkering rechtstreeks naar de werknemer wordt overgemaakt.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| 5.1 | | Is er sprake van een afwijkende belastingheffing? | | | | | |  | | | *Afwijkende belastingheffing komt bijvoorbeeld voor bij grensarbeiders.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  | | | Nee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  | | | Ja⏵Code Loonbelasting | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | |  | | |
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| 5.2 | | Wilt u dat wij de loonheffingskorting op de uitkering van uw werknemer toepassen? | | | | | |  | | | Nee  Ja | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | | | |  | | | 6 | | |  | | | Ondertekening | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | | | | Ondertekend door | | | | | |  | | | Contactpersoon genoemd bij vraag 2.3. | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| Ander persoon⏵ | | | | | Naam | |  | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | | | | Datum en handtekening | | | | | |  | | |  | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |  | | |
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