

## COLPENSIONES PROCEDURES

### Name of the procedure:

Recognition of an allowance for burial

### What is it...

Economic benefit that shall be paid by the entity to the person who can prove have paid for burial expenses or services for a member or a pensioner because of old age of disability. This benefit shall be equivalent to the last base salary quote or the correspondent value to the last received pensionable month payment, depending on the case. Such a benefit cannot be neither lower than five legal minimum wages nor higher than 10 times that salary..

### Steps

1. Download the forms. Request form of economic benefits and Bill account payment form, or you can obtain them at any COLPENSIONES customer attention center nationwide.
2. Present the original identification card at any COLPENSIONES customer attention center nationwide in order to receive proper consultancy for filing these documents.
3. File the forms properly filled in, attach the required documents at any COLPENSIONES customer attention center nationwide.
4. Present clarifications or corrections if required at any COLPENSIONES customer attention center nationwide.
5. Be notified of your administrative act at any COLPENSIONES customer attention center or by electronic means previously allowed.
6. Collect this benefit if admissible.

### Required documents

Type	Description	Attribute	Institution
Filled in application form	Economic benefits request form	Original document	Administradora Colombiana de Pensiones (Colombian Administrator of Pensions)
Identification document	Death certificate of the member or pensioner with an issue date	Copy	Notary Public Office

	no more than 3 months		
Others	Funerary expenses invoice including paid stamp in which states full name of the person who paid the Bill and description of the services provided. Note: this invoice must have the minimum requirements stated in section 617 of the tax statutes.	Original document	Funerary services or burial services company
Others	Detailed certificate issued by the company that provided the funerary services which has been covered by a prevision or pre Memorial Services plan showing detailed information about the funerary services provided, the amount of the contract and the paid amounts as well (in case the petitioner is a relative of the deceased member).	Original document	-----
Others	Pre Memorial Services contract, just in case it exists.	Photocopy	
Others	Authorization letter by the heirs allowing just one of them for the collection process. (Just if the holder of the pre Memorial Services contract is the same person who died).	Original document	The applicant
Filled form	Bill account form containing information where the funerary allowance has to be deposited.	Original	Administradora Colombiana de Pensiones (Colombian Administrator of Pensions)
Others	Duly conferred power of attorney and identification of grantor and attorney. These copies must be enlarged 150% of the original size and also copy of the lawyer's professional card (Should this application is made through an attorney)	Original document and copy.	The applicant.

Others	If there's a third authorized, authorization letter is needed with specific powers, third authorized identification and grantor's identification. Copies of these documents must be enlarged 150% of the original size. Should the authorized be a curator, judgment sentence of interdiction duly executed together with the certificate of understanding such a position, acceptance and taking possession of such a position by the curator or beneficiary's legal representative.	Original copy and	The applicant.
Others	Authorization letter with specific powers, company's representative and member's citizenship card; enlarged to 150% of original size. Certificate of incorporation and legal representation issued no more than three (3) months. (In case the application is done through a private employer). Administrative act that appoints legal representation and possession certificate of the legal representative (in the case the application is made through a public employer)	Original document, copy	The applicant