#### Template 3. Petition for Establishment of Fact of Marriage

#### Republic of the Philippines SOCIAL SECURITY COMMISSION Makati City

Petitioner,

- versus -

SSC CASE NO.

Respondent/s,

#### SOCIAL SECURITY SYSTEM,

Respondent/Intervenor.

x ----- x

# PETITION

**COMES NOW** Petitioner (*full name of petitioner*), by counsel, and unto this Honorable Court, most respectfully states that:

### 1. PERSONAL CIRCUMSTANCES OF THE PARTIES:

#### 1.1. **PETITIONERS**

Name of Petitic	oner	
	Age	Civil Status
Petitioner's hon		
		Zip Code
		Zip Code
Telephone No.		Cellphone No
Place of Work _		
Telephone No.		Cellphone No
• •	assisted by counse mission's Revised F	l or law student pursuant to the requirements Rules of Procedure
	unsel or assisting la	w student
Firm Name/Lav	v school clinical leg	gal education program
Mailing Addres		
Email Address		

Tel/Cel/Fax Nos.	
PTR No	Date/Place of Issue
Roll No	
IBP No	
MCLE Compliance No.	Date/Chapter
Other Compliances	

#### **1.2. RESPONDENT/S/ INTERVENOR**

The last known address of Respondent/s (name/s of respondent/s) is/are at (state mailing address/es, if known) where summons and other legal processes may be served;

Respondent/Intervenor Social Security System is a corporate body created by law pursuant to RA 1161, as amended, with principal office located on East Avenue, Diliman, Quezon City, Metro Manila

#### 2. STATEMENT OF FACTS AND OTHER CAUSES OF ACTION

**2.1.** Petitioner is the legitimate surviving spouse of deceased SS member (*name of deceased member*) with SS No. \_\_\_\_\_\_, entitled to the SS death benefit under Section 12-B (d)<sup>1</sup> or Section 13<sup>2</sup> of the Social Security Act of 1997 both in relation to 8 (e) (1) and (k)<sup>3</sup> thereof.

Evidencing the fact of petitioner's marriage with deceased member are the following:

- Marriage Contract (Annex "")
- Petitioner's Advisory on Marriages issued by the Philippine Statistics Authority (PSA) (Annex "\_\_")
- Deceased Member's Advisory on Marriages issued by the PSA (Annex "\_\_")

In the absence of the foregoing documents, the following documents will support the fact of his/her marriage with deceased member:

- (e) **Dependents** The dependents shall be the following:
  - "(1) The legal spouse entitled by law to receive support from the member; xxx

<sup>&</sup>lt;sup>1</sup> SEC. 12-B. *Retirement Benefits.* - (d) Upon the death of the retired member, his primary beneficiaries as of the date of his retirement shall be entitled to receive the monthly pension: xxx

<sup>&</sup>lt;sup>2</sup> **SEC. 13.** *Death Benefits.* – Upon the death of a member who paid at least thirty-six (36) monthly contributions prior to the semester of his death, his primary beneficiaries shall be entitled to the monthly pension: Provided, That if he has no primary beneficiaries, his secondary beneficiaries shall be entitled to a lump sum benefit equivalent to thirty-six (36) times the monthly pension. If he has not paid the required thirty-six (36) monthly contributions, his primary or secondary beneficiaries shall be entitled to a lump sum benefit equivalent to the monthly pension times the number of monthly contributions paid to the SSS or twelve (12) times the monthly pension, whichever is higher (Social Security Act of 1997)

<sup>&</sup>lt;sup>3</sup> SEC. 8. *Terms Defined.* – For the purpose of this Act, the following terms shall, unless the context indicates otherwise, have the following meanings:

XXX

<sup>(</sup>k) **Beneficiaries** – The dependent spouse until he or she remarries, the dependent legitimate, legitimated or legally adopted, and illegitimate children, who shall be the primary beneficiaries of the member: xxx

- Certificate of Non-Availability of Records of Marriage issued by the Local Civil Registrar (Annex "\_\_")
- Certificate of Non-Availability of Records of Marriage issued by the PSA (Annex "\_\_")
- Deceased Member's Advisory on Marriages issued by the PSA (Annex "\_\_")

and two or more of the following documents (specifically showing date of marriage or status of relationship):

- Certificate issued by the church as to the celebration of marriage per its record (Annex "\_\_")
- Affidavit/s of person/s who witnessed petitioner and member's wedding (Annex "\_\_")
- Birth Certificate/s of child/ren of petitioner and member
- GSIS Policy of member
- Certificate/s of Land Title/s of petitioner and/or member
- Life Policy/Insurance of member
  - Pag-IBIG Member's Data Form of member
  - Affidavits of Persons who attended petitioner and member's wedding
  - Others, specify\_\_\_\_\_
- **2.2.** SS member (*name of deceased member*) died on (*date of death*), as shown in the attached:
  - Death Certificate (Annex "")
- **2.3.1.** Did you file a death claim with the SSS on account of member's death?
  - Yes No
- **2.3.2.** If **NO**, why did you file a case with this Commission without first filing a claim with the SSS? (*State reason/s below*)

**2.3.3.** If **YES**, what is/are the ground/s for the denial of your claim? (*Please attach letter of denial*)

Insufficiency of documents submitted

Deceased member has designated another person in his SSS Forms E-1 and/or E4 with relationship as follows:

\_\_\_\_\_

spouse, named
child/ren, namely:

others, specify \_\_\_\_\_

 $\square$ 

	Another person/s filed a similar claim for SS death benefits Others, specify
2.3.4.	What is the SSS' written action in denying your claim?
	denial by the SSS President denial by the Manager or Officer-in-Charge or authorized personnel of the SSS Department/Branch/Representative Office concerned
	Certification from the Benefit Appeals Review Committee
2.3.5.	(State your ARGUMENTS/DISCUSSIONS including applicable provisions of law, rules and regulations and attach documentary evidence)

#### 3. REMEDIES OR RELIEF SOUGHT

**WHEREFORE,** petitioner respectfully prays that judgment be issued declaring petitioner (*state name of petitioner*) to be deceased member (*state deceased member's name*)'s legitimate surviving spouse and primary beneficiary, entitled to the survivor's pension benefit provided under the the Social Security Act of 1997.

Petitioner prays for such other reliefs as may be just and equitable in the premises.

(place signed), Philippines, (date signed).

(Name of petitioner and his/her signature or name/s and signature/s of his/her counsel or the assisting law student and his/her supervising attorney)

## VERIFICATION AND CERTIFICATION AGAINST FORUM SHOPPING