

## Request for payout

Client number: \_\_\_\_\_

Policyholder:

First name, last name \_\_\_\_\_

Street, no. \_\_\_\_\_

Postcode, place \_\_\_\_\_

Marital status \_\_\_\_\_

Social insurance no. (AHV)

7 5 6 .  .  .

Telephone no. (for queries) \_\_\_\_\_

E-mail address \_\_\_\_\_

### Pension fund purchases

Have you made any purchases of occupational provisions over the past three years?  YES  NO

If yes: please enclose the relevant certificates (copy of purchase confirmation)

If purchases have been made, the benefits resulting from them may not be withdrawn again as a lump sum (in whatever form) within the next three years (Art. 79b cl. 3 OPA). A lump-sum withdrawal is only possible **after** the three-year block on lump-sum withdrawals lapses.

### Reason for payment (enclose documentation evidencing the reason for the payout)

- Reaching the AHV reference age or early payout** (no earlier than 5 years before reaching the AHV reference age)
  - Copy of policyholder's passport or ID (with recognisable signature)
  - Confirmation of place of residence (not older than 1 month)
  - Civil status certificate or equivalent document (not older than 1 month)
  - Copy of spouse's/registered partner's passport or ID (with recognisable signature)
  - Signature of spouse/registered partner (on this form)
- Divorce / partnership dissolved by law**
  - Copy of the final divorce or dissolution verdict (*Swiss divorce decree*)
  - Name and address of the employee benefits/vested benefits institution of the entitled spouse/registered partner
  - QR-bill (if available) from the employee benefits/vested benefits institution of the entitled spouse/registered partner
  - Copy of policyholder's passport or ID (with recognisable signature)
- Transfer to an employee benefits institution (BVG pension fund)**
  - Certificate from the employee benefits institution (certificate of entry or pension certificate)
  - QR-bill or confirmation from the employee benefits institution
- Transfer to other vested benefits institution**
  - Certificate from the employee benefits institution (certificate of entry or pension certificate)
  - QR-bill or confirmation from the new employee benefits institution





**Certification of signature(s), if payout amount is CHF 20 000 or higher. Exception: transfer to another employee benefits institution.**

**Important: The signature(s) must be certified on this payment form. Please only sign in the presence of the official (at the notary's office, municipal office at your place of residence, etc.)**

Stamp and signature of the certifying officer

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Signature of spouse/registered partner (if required)

*Send the original (not a copy, fax or e-mail) to Vested Benefits Foundation Swiss Life*

All information on the processing of personal data and the processing purposes involved can be found in the **data protection consent form**, the latest version of which is available at any time at [www.swisslife-wealth.ch/en/dse-fz3a](http://www.swisslife-wealth.ch/en/dse-fz3a) or at the following address: Vested Benefits Foundation Swiss Life, c/o Swiss Life Wealth Management Ltd, Service Center, General-Guisan-Quai 40, P.O. Box, 8022 Zurich.

