

If you have any questions, please contact your customer advisor:

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Notification of withdrawal

Departure on _____

Name _____ First name _____

Street _____

Postcode/city/country _____

Date of birth _____ Employee no. _____

E-mail _____ Phone _____

Marital status ☐ single ☐ married ☐ divorced

☐ registered partnership ☐ dissolved partnership ☐ widowed

Capacity to work Were you able to work full time upon departure? ☐ yes ☐ no

Joining a new pension fund (switching jobs)

New employer _____

Name and address of the new pension fund _____

Bank/IBAN _____

Please enclose a payment slip of the new pension fund

Not joining a new pension fund

Transfer of vested benefits to

☐ Vested Benefits Foundation of PFS Pension Fund Services AG, P.O. Box, 4002 Basel
(account held at UBS AG)

☐ Vested benefits account/vested benefits policy

Name of vested benefits institution _____

Bank/IBAN _____

Please enclose a payment slip or account confirmation of the vested benefits institution

Place/date _____ Signature of the insured person _____

Cash payment of vested benefits

Please note the information provided on the enclosed fact sheet regarding cash payments!

- ☐ Permanent departure from Switzerland (for cross-border commuters terminating employment in Switzerland)

- to the following country within the EU/EFTA

Only those benefits that are over and above the mandatory benefits can be paid out in cash. We will transfer the mandatory portion (LOB share) to a vested benefits account of your choice (list on page 1, «Not joining a new pension fund»).

- to the following country outside of the EU/EFTA

The entire amount of the vested benefits will be paid out in cash.

Please enclose confirmation of deregistration from your community of residence and confirmation of registration of new residence (for cross-border commuters: confirmation of residence and new employment contract or confirmation from the unemployment office)

- ☐ Self-employment as a main source of income

Please enclose confirmation from the AHV compensation office

- ☐ Negligible amounts (termination benefits are less than one annual employee contribution)

Payment address

- ☐ for cash payments in Switzerland

Bank/IBAN

- ☐ for cash payments to a bank outside Switzerland

Name of bank and full address

IBAN/SWIFT

Signature

Persons who are **married or living in a registered partnership** need to provide an officially certified signature of their spouse/registered partner.

We require current proof of marital/civil status from **unmarried persons**. If a partner is given as a beneficiary, we also need his or her officially certified signature.

Place/date

Signature of the insured person

Place/date

Officially certified signature of spouse/registered partner or partner who is a beneficiary