

Personal data

Dossier no

Full or company name

Date of birth/fundation AVS/IDE no

Marital status

Your nationality(ies)

(if there are several, please specify all)

Phone no Private E-mail

Residential address / Headquarters

Street

ZIP, city Country

Correspondence address if it differs from the residential address

Street

ZIP, city Country

Payment details

IBAN no

Name of financial institution

ZIP, city Country

Notes for foreign payments

- please provide a bank account identity (RIB) with IBAN and SWIFT numbers
- unless you indicate otherwise, the payment will be made in the currency of the country of destination.

Signature

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Place and date

Signature of the insured person

Any change in the above information must be immediately notified to us.

