

Personal data

Full name: Dossier no :
 Date of birth: AVS no:
 Marital status: Nationality(ies):
 Street:
 ZIP, city: Country:
 Phone no: Private email:

Choice of benefits

This choice is a definitive and irrevocable decision as from the beginning of the entitlement to benefits. A retirement benefit that follows an ongoing disability benefit (annuity and/or release from payment of contributions) cannot be paid as a lump sum.

This form must reach Profelia at least 1 month before the retirement date (except for the AVS bridge annuity where a period of 3 months must be respected).

☐ AVS bridge annuity

In the event of retirement before the legal AVS age, you can request an AVS bridge annuity until the legal retirement age.

Amount chosen*: CHF
 (* invariable and not exceeding the maximum full AVS annuity)

Financed by: ☐ lifetime deduction on retirement annuity
☐ lump sum payment from the employer
☐ lump sum payment from the employee

- ☐ Entirely in form of annuity => complete figure 1
☐ Entirely in form of lump sum => complete figure 2
☐ Combined in the form of annuity and lump sum => complete figures 1 and 2 and the following data:
- a. amount of lump sum desired:
 (at least a quarter of your savings account) CHF
 The balance is paid in the form of annuity.
- b. amount of annual annuity desired: CHF
 The balance is paid in the form of lump sum.

1. Information to be filled out for payment of an annuity

Payment details

IBAN no:
 Name of financial institution:
 ZIP, city: Country:
 Full name of the account holder:

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.

For information, the annuity is payable at the beginning of the month.



Data related to children aged under 25

- a. **Children aged under 18:** please indicate below their personal data and enclose a copy of the family certificate or birth certificate.

| Full name | Date of birth | Monthly income CHF | Foster* |
|-----------|---------------|--------------------|--------------------------|
| | | | <input type="checkbox"/> |
| | | | <input type="checkbox"/> |

- b. **Children between 18 and 25** (in apprenticeship, study or receiving a full annuity from Disability Insurance (AI)): please indicate their personal data below and provide a certificate of study or apprenticeship stating the start and end dates of their studies or a copy of the AI decision, as well as a copy of the family certificate or birth certificate.

| Full name | Date of birth | Hours of study | Monthly income CHF | Foster* |
|-----------|---------------|----------------|--------------------|--------------------------|
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

* For foster children, please tick the appropriate box and indicate under "Monthly income*" if a maintenance is paid by a third party.

Taxation

Country of current residence:

If you are domiciled in Switzerland, do you intend to settle abroad when you retire?

☐ no

☐ yes, departure date :

Address abroad:

Street:

ZIP, city: Country:

For persons domiciled in Switzerland: I take note that any total annual annuity above CHF 500.00, will be declared to the tax authorities through Profelia, in accordance with the provisions of the Federal Law on Withholding Tax of October 13, 1965.

For persons domiciled abroad or intending to settle abroad at the time of retirement: I take note that withholding tax may have to be levied on my annuities. If appropriate, additional information will be sent to me separately.

Signature

I hereby certify that the information provided above is true. I note that **a copy of a valid identity card, residence permit or passport is necessary for processing the dossier**. Profelia will only be able to pay the annuity if the form is duly completed and the requested documents are provided.

I take note that my choice is a definitive and irrevocable decision.

.....
Place and date

.....
Signature of the insured person

2. Information to be filled out for the payment of the lump sum

Have you made a voluntary purchase with a pension fund within the last three years?

☐ yes

☐ no

Payment details

It is compulsory for the lump sum benefit to be paid to a financial account belonging to the insured person. By signing this form, the insured person certifies that the financial account indicated below is not that of a third party.

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.

Taxation

Country of current residence:

If you are domiciled in Switzerland, do you intend to settle abroad when you retire?

☐ no

☐ yes, departure date:

Address abroad

Street:

ZIP, city: Country:

For persons domiciled in Switzerland: I take note that any lump sum payment exceeding CHF 5'000.00, will be declared to the tax authorities through Profelia, in compliance with the provisions of the Federal Law on Withholding Tax of October 13, 1965.

For persons domiciled abroad or intending to settle abroad at the time of retirement: I take note that withholding tax will be levied on the lump sum benefit. To determine the applicable rate, I confirm that my personal situation is as follows:

- ☐ single person (single, widowed, divorced, taxed separately or bringing up a minor child who is in an apprenticeship or studying)
- ☐ married person living in the same household.

In some cases, tax refunds can be claimed within three years. An official application form for reimbursement will be given to you together with the certificate of tax at source.

Signatures

I hereby certify that all information provided above corresponds to the truth. I have taken note that the lump sum payment reduces the annuity in proportion to the amount paid. Profelia will only be able to pay the lump sum upon retirement if the form is duly completed and the requested documents are provided.

I have taken note that the choice made is a definitive and irrevocable decision.

.....
Place and date

.....
Signature of the insured person*

The spouse/registered partner has taken note of the consequences (reduction/withdrawal of benefits in case of death or divorce) of paying the amount indicated on this form and gives his/her consent.

.....
Place and date

.....
Signature of the spouse/registered partner*

- * Depending on your personal situation, various documents must be attached to this form to prove your marital status and, if applicable, the consent of your spouse/registered partner. You will find all the information you need in the enclosed notice.

In case of cash payment, withdrawal/pledging for encouragement of home ownership or the lump sum payment of benefits, Profelia must check the insured person's marital status or the consent of his/her spouse or registered partner.

The documents to be provided and the steps to be taken by the insured according to his/her personal situation are defined below.

For unmarried insured persons

Unmarried persons and who are not bound by a registered partnership (single, divorced, dissolved partnership or widowed) must provide us with a certificate of marital status **less than 90 days old**.

This document can be ordered from the competent civil registry office.

For insured persons who are married or bound by a registered partnership

Persons who are married, separated or bound by a registered partnership must have their **handwritten signature (holograph)** legalised, as well as that of their spouse/partner.

Legalisation procedure in Switzerland

| | |
|-------------------|--|
| Official | Only a legalisation performed by a notary is permitted. To have their signatures legalised, the insured person and his/her spouse/partner must present themselves in person before a notary , bringing with them a valid proof of identity. The legalisation of a signature is billed by the notary on the basis of the applicable rate. |
| Simplified | It is also possible for the insured person and his/her spouse/partner to have the signatures legalised free of charge by going personally to one of our receptions with a valid identity document . |

Legalisation procedure abroad

| | |
|-------------------|--|
| By apostil | If legalisation cannot be performed in Switzerland or by video (see below), the request form for cash payment, withdrawal, pledging, or the form for confirming the choice of the lump-sum payment of benefits must be accompanied by a certified copy of the proofs of identity of the insured person and his/her spouse/partner. The copy must be authenticated by an apostil. The website of the Hague Conference on Private International Law (www.hcch.net) provides additional information on apostils. |
|-------------------|--|

Legalisation procedure in Switzerland or abroad

| | |
|--------------------------|--|
| By video exchange | The insured person and his/her spouse/partner can also have their signatures verified free of charge by video exchange with the file case manager. Please contact us if you are interested. |
|--------------------------|--|