

### Personal data

Full name: ..... Dossier no: .....

Date of birth: ..... AVS no: .....

Marital status: ..... Nationality(ies): .....

Street: .....

ZIP, city: ..... Country: .....

Phone no: ..... Private email: .....

### Voluntary purchase

Did you purchase benefits with a pension fund in the last three years?  no  yes

### Cash payment

I apply for cash payment of my vested benefits for the following reason (only one choice possible):

1.  I am leaving Switzerland definitely or I do not reside in Switzerland.  
Please provide:
  - for persons living in Switzerland: a certificate of departure dated less than 90 days ago issued by the resident's registration office.
  - for cross-border workers: a certificate attesting cancellation of the cross-border working permit or a copy of the cancelled permit.
  
2.  I started a self-employed occupation as a principal employment less than a year ago and am no longer subject to a mandatory occupational benefit scheme.  
Please provide a copy of the certificate from the AVS compensation fund dated less than 90 days ago.  
Indicate the activity(ies) pursued (if several, indicate all mentioning the employment level of each):  
Activity pursued: .....  
Employment level: .....%  
  
Activity pursued: .....  
Employment level: .....%
  
3.  In the letter about the termination of my insurance, you inform me that my vested benefits amount to less than my annual contribution.  
Please provide a copy of a valid official identity document with a photography.



## Payment information

The benefit in the form of a lump sum must be transferred to a financial account owned by the insured person. By signing this form, the insured person certifies that the financial account indicated below is not owned by 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 in another country soon?

no

yes, departure date: .....

Foreign address:

Street: .....

ZIP, city: ..... Country: .....

**For people domiciled in Switzerland:** I take note that any lump sum payment above CHF 5'000.00 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 people domiciled abroad or who will soon move abroad:** I take note that withholding tax will be withheld at source on the lump sum payment. To allow Profelia 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, the tax refund can be claimed within three years. An official refund application form will be given to you together with the certificate concerning the withholding tax.

## Signatures

I hereby certify that all the information provided above is accurate and true and I take note that I have to take care personally of my pension provision using the amount, if any, received for this purpose. Profelia will only be able to make a cash payment of the vested benefits if the form is duly completed and the required documents are provided.

.....  
Place and date

.....  
Signature of the insured person

The spouse / registered partner is in full knowledge of the consequences of a cash payment of the vested benefits to his/her spouse / registered partner and gives his/her consent to the payment.

.....  
Place and date

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

For people being married, separated or bound by a registered partnership, the signatures of the insured person and of his/her spouse/registered partner must be legalised by a notary. Persons concerned may also have their signatures verified free of charge at our reception desk or agencies bringing with them a valid proof of identity.

For unmarried persons who are not bound by a registered partnership (single, divorced, dissolved partnership or widowed), please include a certificate of marital status, less than 90 days old, to be requested from the competent Civil Registry Office.

**This form can be returned to us via your Espace personnel. If the legalisation of signatures is necessary, this must be done before sending the form.**