

**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 Retraites Populaires, 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 Retraites Populaires 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. Retraites Populaires 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 has taken note of the consequences (reduction/withdrawal of benefits in case of death or divorce) of a cash payment of the highest amount shown under "Vested benefits" on the detailed vested benefits statement sent to the insured person 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.

**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.**

In case of cash payment, withdrawal/pledging for encouragement of home ownership or the lump sum payment of benefits, Retraites Populaires 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**

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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**

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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**

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<b>Official</b>	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 <b>notary</b> , 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.
<b>Simplified</b>	It is also possible for the insured person and his/her spouse/partner to have the signatures legalised <b>free of charge</b> by going <b>personally</b> to one of our receptions <b>with a valid identity document</b> .

#### **Legalisation procedure abroad**

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<b>By apostil</b>	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 ( <a href="http://www.hcch.net">www.hcch.net</a> ) provides additional information on apostils.
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#### **Legalisation procedure in Switzerland or abroad**

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