

**Personal data**

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

**Choice of deferment (A) or retirement (B)**

**A.**  **Deferment** (postponing the payment date of annuity/lump sum) until the age of ..... \*  
 \*no later than 5 years after the legal retirement age.

.....  
 Place and date ..... Signature of the insured who requests the deferment .....

**B.**  **Retirement on** ..... **with the following benefit** (only one choice possible)  
 This choice is a definitive and irrevocable decision as from the beginning of the entitlement to benefits. This form must reach Retraites Populaires **before the retirement date.**

- 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: 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: .....  
 Date of birth: .....  
 Street: .....  
 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.

Payment frequency for the annuity (payable at the end of each month/quarter/half-year/year):  
 monthly       quarterly       half-yearly       yearly  
 The payment of the first annuity is made at the end of the first month following retirement.

At the time of my death I wish the annuity to be paid to my surviving spouse:  
 no    yes    If yes, I wish my surviving spouse to receive, after my death, an annuity in the following proportion to my retirement annuity:  
 40 %    60 %    75 %    80 %    100 %

If appropriate, the amount of the retirement annuity will be recalculated taking this benefit into account.



**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 Retraites Populaires, 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.** Retraites Populaires 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 Retraites Populaires, 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 allow Retraites Populaires to determine the applicable rate, I confirm that my personal situation is as follows:

single person (unmarried; widowed, divorced or taxed separately)

single person assuming the full maintenance of a minor child, in apprenticeship or studies

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. Retraites Populaires will only be able to pay the lump sum upon retirement if the form is duly completed and the requested documents are provided.

I take 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 of the retirement lump sum payment of his/her spouse/registered partner, and confirms his/her agreement to this payment.

.....  
Place and date

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

For persons who are married, separated or in a registered partnership, the signatures of the insured and his/her spouse/registered partner must be notarised. The persons concerned can also go to our reception or one of our agencies with an identity document in order to have their signatures authenticated free of charge.

For persons who are unmarried and not bound by a registered partnership (single, divorced, partnership dissolved or widowed), please provide a certificate of marital status less than 1 month old, to be requested from the competent civil registry office.