



REQUEST TO WITHDRAW VESTED BENEFITS

This form is used to obtain the information necessary for all or part of the funds from your Rentes Genevoises vested benefits policy to be paid out in cash, in accordance with articles 3 et seq. of the Federal Act on the Vesting of Occupational Old Age, Survivors' and Invalidity Benefits (Loi fédérale sur le libre passage dans la prévoyance professionnelle vieillesse, survivants et invalidité). It should be completed and signed by the policyholder.

1. Policyholder details

Policy n° :

Last name and first name :

Date of birth : OASI (AHV/AVS) n° :
(dd.mm.yyyy)

Marital status : Since :

Address :

Postcode : Town/City :

Country : Phone number :

Email address :

2. Reason for requesting cash payment

I'm leaving Switzerland for good or I am not resident in Switzerland

Please enclose the original certificate of departure issued by the cantonal immigration office stating the date of your departure, or an original proof of residence issued by the competent authorities at your new place of residence abroad certifying that you are a permanent resident, or a copy of your last tax return.

I confirm that I have read and understood [the bilateral agreements in the context of a permanent departure](#).

I have become self-employed in Switzerland within the last year and am therefore no longer required to belong to an occupational pension scheme

Please enclose an original certificate (no more than 1 month old) issued by the Central Compensation Office (caisse de compensation AVS) confirming your self-employed status.

If you are resident abroad, please enclose proof of residence confirming your status as a permanent resident.

I understand that Rentes Genevoises will declare in writing to the Swiss Federal Tax Administration (Administration fédérale des contributions) the lump-sum benefit due from Rentes Genevoises.

Self-employed persons may only request cash payment of their vested benefits once they take up self-employment, or more precisely, during the first year of their self-employed activity.



I receive a full disability pension from the Federal Disability Insurance (IV/AI), (payment of old-age benefit)

Please enclose a copy of the current decision of the IV/AI granting a full disability pension and a certificate from your former pension fund confirming that you are not entitled to receive a disability pension under the OPA.

I have reached retirement age¹
Only for insured persons benefiting from « CPA plp 2011 » and subsequent general terms and conditions

Benefit amount : total
 partial : CHF :

For persons who are not resident in Switzerland : please enclose the original certificate of departure issued by the cantonal immigration office stating the date of your departure, **or** an original proof of residence certifying that you are a permanent resident, **or** a copy of your last tax return.

3. Payment details

Name and address of bank/post office :
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.....

IBAN :

Account no. :

BIC/SWIFT :

All payments are made in Swiss francs by bank or post office transfer only. For payments outside of the European Union, please enclose your full bank account details.

4. Signature-s

This document must bear your notarised signature and that of your spouse if you are married, or of your partner if you are in a civil partnership (this is mandatory for persons who are married or separated). It is also possible to come to the head office of Rentes Genevoises (by appointment only) with your spouse or civil partner with a valid official document bearing a photo and legible signature.

I declare that all the information provided above is true and correct. I understand that cash payment of my vested benefits terminates all my claims in relation to Rentes Genevoises. Rentes Genevoises will only be able to process the cash payment of the vested benefits if this questionnaire is duly completed and the requested supporting documents are submitted.

I note that if I leave Switzerland or if I am not resident in Switzerland, Rentes Genevoises will have to deduct withholding tax from the pension capital, and that if the government of my (future) country of residence has concluded a double taxation agreement with Switzerland, I can request a refund of the tax paid within three years (an official form must be completed).

¹ The statutory retirement age is 64 for women and 65 for men. The right to take early retirement starts at 59 for women and 60 for men.

I confirm that I have not made any pension fund buy-ins from a pension scheme in the last three years.

Place : Date :

Signature of notary or state official :

The spouse/civil partner acknowledges the consequences of cash payment of the benefit of his/her spouse/civil partner and agrees to this payment.

Place : Date :

Signature of insured party :

Signature of spouse or civil partner* :

After the cash payment, I would like to be contacted by an advisor **yes** **no**

* Please enclose :

- A copy of your valid official identity document bearing photo and legible signature
- If you are married, the identity document of your spouse is also required
- For persons who are single, divorced or widowed, a recent certificate of marital status is required (no older than 1 month). This should be requested from the competent civil registry office
- For persons who are married, separated or in a civil partnership, a copy of the family record book, marriage certificate or civil partnership contract is required
- Original insurance policy or original vested benefits certificate

Please note : The documents must be in English, French, German or Italian.

Please note that the accrued capital is transferred with interest and the non-contractual annual bonus according to the insurer's results. The administration fees are deducted from this amount (1% of the amount paid, up to a maximum of CHF 350.-).