

Request for retirement benefits



CIEPP

Caisse Inter-Entreprises
de Prévoyance Professionnelle

ZKBV - Zwischenbetriebliche Kasse für Berufliche Vorsorge
CIPP - Cassa Interaziendale di Previdenza Professionale

PERSONAL DATA OF THE INSURED PERSON

Name and first name:

AVS no.: 756.

Pending divorce proceedings: ☐ Yes ☐ No

Telephone:

Full current address:

Name of current employer:

Do you have children aged under 18, or under 25 who are studying or apprenticed? ☐ Yes ☐ No

Are you currently unable to work (illness or accident)? ☐ Yes ☐ No

Civil status:

Date of birth (dd/mm/year):

Gender: ☐ M ☐ F

E-mail:

Full retirement ☐

Partial retirement ☐

I wish, as from _____ (tick and complete as appropriate):

☐ to receive my benefit as an annuity

☐ to receive my benefit in the form of principal*

☐ to receive my benefit in mixed form principal/annuity)*:

CHF _____ as principal, the balance to be converted into a life annuity

or _____ % of my retirement assets in the form of principal, the balance to be converted into a life annuity

☐ receive a temporary additional retirement pension until the legal retirement age, of CHF _____ / month (in the case of full or early retirement only)

In case of partial retirement only:

Salary before partial retirement CHF _____ and after partial retirement CHF _____

Have you received a retirement benefit in the form of principal from another pension fund? ☐ Yes ☐ No

*I take note of the fact that on the amount paid in capital, all regulatory rights are terminated, including those to benefits in favour of survivors and children of pensioners, and I confirm that I have not made any buyback of contributions during the last 36 months.

I take note that the choice of the form of benefit is irrevocable

DEFERRED RETIREMENT / MAINTENANCE OF CONTRIBUTIONS

I wish to (tick and complete as appropriate):

☐ defer payment of my retirement benefit (without maintaining liability and as long as the working relationship or exercise of the lucrative activity lasts, but for a maximum of 5 years)

☐ maintain my liability for occupational pension benefits beyond the reference age (no payment of retirement benefits while liability maintained and until cessation of the pre-existing lucrative activity but for a maximum of 5 years)

PAYMENT DETAILS

For payments abroad, please enclose a Bank Account Statement with the full address of the bank.

Name of the account holder:

Full name and address of the Bank:

Account no. (IBAN):

Bank clearing / Swift:

Place and date:

Signature of the insured person:

Certified* signature of the spouse
or registered partner (LPart):

Box reserved for the certification of
the signature by the competent authority

*The certified signature of the spouse or registered partner (LPart) is required for lump-sum payments if you are married, separated, a registered partner (LPart), or in the process of getting a divorce or legally dissolving a registered partnership (LPart). To do so, you can either make an appointment with us (with original identity papers and the family record book or family certificate) or return the application signed by the spouse or registered partner (LPart) and certified before a registrar or notary.

Documents that must be attached to the application:

- A copy of the identity documents of the insured and the spouse or registered partner (LPart)
- A copy of the family record book or family certificate (for married or LPart insured persons)
- For lump-sum payments, an individual civil status certificate less than one month old (for single, divorced or widowed persons)
- A certificate of study or apprenticeship for children aged between 18 and 25

The Benefits Department is at your disposal for any further information: Direct line 058 715 33 37 - Counter: 8.30 a.m. - 11.30 a.m. / 1.30 p.m. - 5.00 p.m. (4.00 p.m. Friday)

Offices

Bulle	Rue Condémine 56	T 026 919 87 40
Fribourg	Rue de l'Hôpital 15	T 026 552 66 90
Neuchâtel	Av. du 1 ^{er} -Mars 18	T 032 727 37 00
Porrentruy	Ch. de la Perche 2	T 032 465 15 80

Administrative headquarters of the pension fund
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