

Form for active insured persons

Questionnaire regarding early or ordinary retirement

Send to: Pension Fund of the Siemens Companies in Switzerland,
Freilagerstrasse 40, 8047 Zurich

Insured person

Last name: _____		First name: _____
Street name, no.: _____		
Postcode: _____	City: _____	Country: _____
Date of birth: _____		Insurance no.: _____
Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Registered partnership <input type="checkbox"/> Dissolved partnership		
Date of marriage or registration of partnership: _____		Employer: _____
Place of origin/nationality: _____		Residence permit (foreign nationals): _____
Tel. no.: _____		E-mail address: _____

Spouse, registered partner or domestic partner registered with the Pension Fund

Last name: _____	First name: _____
Date of birth: _____	Social security no.: _____

Information on retirement

What type of retirement applies to you? Ordinary retirement
 Early retirement
 Partial retirement down to (%): _____

(Partial) Retirement as of (date): _____

In the case of early retirement:

Are you currently fully fit to work? Yes No

I would like to draw a monthly AHV replacement pension* of CHF: _____
(max. 100% of the monthly AHV pension)

* Please note that if you draw an AHV replacement pension, your retirement pension and/or the retirement capital to be paid out will be reduced by the corresponding amount pursuant to Art. 26 of the Pension Fund Regulations.

Retirement pension and/or lump-sum withdrawal*

In what form do you wish to draw the retirement benefits to which you are entitled?

- 100% retirement pension
- 100% lump-sum withdrawal
- Partial lump-sum withdrawal of CHF _____ (remaining amount as retirement pension)
- An annual pension of CHF _____ (remaining amount as lump-sum withdrawal)

* **Information regarding lump-sum withdrawal:** Voluntary purchases of additional benefits within the three-year blocking period applicable to lump-sum withdrawals will be converted into a retirement pension.

Preferential financial treatment of the spouse or surviving partner

- I request that the level of prospective entitlement to a spouse's pension be increased pursuant to Art. 24.8 of the Pension Fund Regulations. I acknowledge that this will reduce my lifelong retirement pension.
- Monthly increase to:
- 70%
 - 80%
 - 90%
 - 100%

In the case of 100% lump-sum withdrawal or partial lump-sum withdrawal: Consent of the spouse or registered partner:

I hereby consent to the lump-sum withdrawal.

Last name: _____ First name: _____

Place/date Signature of spouse/registered partner

Official certification of this signature:

Certifications in Switzerland: Municipal or city council office, notary

Place/date Official stamp/signature

Signature of insured person

I confirm that I have noted the provisions set forth in the information sheet "Retirement".

Last name: _____ First name: _____

Place/date Signature of insured person

Your bank details

Name of bank: _____

Postcode: _____ City: _____ Country*: _____

IBAN: _____ SWIFT code*: _____

Account holder (first name, last name): _____

* for international payments

Required documents/confirmations

In the case of 100% lump-sum withdrawal or partial lump-sum withdrawal

- Current certificate of civil status of the insured person (obtainable from the registry office; the certificate must be no more than three months old on the retirement date)
- Official certification of the spouse's/registered partner's signature (on the second page of this document; the certification must be no more than three months old on the retirement date)

If there are children under the age of 18 years old or still in education/training

- Family identity document
 - Where applicable, copy of contract of apprenticeship or confirmation of student enrolment
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