

Application for payment - becoming self-employed

Note:

The payment can only be made within a year of becoming self-employed as your primary occupation. Payment may be made where the legal forms sole trader and partnership are used, but not limited company (GmbH) or public limited company (AG).

Client	
Client number	Plan number
First name	Surname
Marital status	Street, number
Postcode	Town
Date of birth	Social security number
Telephone number	E-mail

Documents to be submitted

- Copy of the Client's passport/ID (bearing a legible signature)
- Copy of the current confirmation from the OASI compensation fund of registration as a self-employed person
- If not married or living in a registered partnership:
 Certificate of civil status/official confirmation of civil status (issued less than 1 month ago)

• People who are married or living in a registered partnership: Copy of the spouse/registered partner's passport/ID (bearing a legible signature)

Tax domicile at the payment date

Domiciled in **Switzerland** Tax return will be submitted directly to the Federal Tax Administration by the Foundation

Domiciled **abroad** Withholding tax will be deducted directly by the Foundation

If the documents submitted cast doubt on the tax domicile, the Independent Pension Foundation 3a Zurich reserves the right to levy withholding tax on the payment.

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Declaration of primary occupation and mandatory occupational pension provision (BVG/OPA)

Engaged in primary occupation since:		Employment level in %:	
OASI annual salary in CHF:			
Engaged in secondary occupation since: (payment is not possible)		_	
I am currently enrolled in a 2nd pillar pension Yes No	institution:		
Transfer Payment can only be made to an account in th	e Client's name		
Beneficiary	IBA	AN	
Name of bank			

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I confirm that the information above is accurate and complete, as are the documents I have submitted. The pension account/securities account will be closed once the entire capital has been transferred. I permit the Independent Pension Foundation 3a Zurich to seek further clarification if necessary. At the same time, I issue the order to sell any securities investments up to the payment date. I acknowledge that the Independent Pension Foundation 3a Zurich must report the payment to the Federal Tax Administration or deduct withholding tax.

I confirm that I have become self-employed as my primary occupation and am no longer subject to the mandatory occupational benefits provision (BVG/OPA).

Place	Date	Signature of the Client
Place	Date	Signature of spouse/registered partner

Please send the form to:

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Sending address:	Sending address:	
Lies this sever sheet to ferward the decuments in a window envelope		
Use this cover sheet to forward the documents in a window envelope.		

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