

Application for payment – transfer to a pension fund

Client

Client number

Plan number

First name

Surname

Marital status

Street, number

Postcode

Town

Date of birth

Social security number

Telephone number

E-mail

Payment instruction

Transfer of the entire pension assets and closure of the pension relationship

Partial withdrawal/amount requested in CHF _____

Requirement: Confirmation in writing from the pension fund of the amount to be transferred has been submitted.

Documents to be submitted

- Confirmation of the new pension fund's bank details or QR payment slip

Transfer to the following pension fund

Name of the pension fund	IBAN
<hr/>	<hr/>
Name of bank	Reference (contract number, employer)
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I confirm that the information above is accurate and complete, as are the documents I have submitted. If the entire capital is being withdrawn, the pension account/securities account will be closed once the funds have been transferred. I permit the Independent Vested Benefits Foundation Schwyz to seek further clarification if necessary. At the same time, I issue the order to sell any securities investments in the amounts needed up to the payment date.

Place	Date	Signature of the Client
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Please send the form to:

Sending address:

Sending address:

Use this cover sheet to forward the documents in a window envelope.