



→ Please send the completed and signed form together with the necessary documentation to:

Stiftung Auffangeinrichtung BVG
Vested Benefits Accounts
P.O. Box
8050 Zurich

POFICHBEXXX (SWIFT)
CH50 0900 0000 8001 30227 (IBAN)

www.chaeis.ch

+41 44 468 22 22 (Tel.)
Telephone service (Mon. to Fri.)
8 a.m. to midday/
1.30 p.m. to 5 p.m.

Notification

Changes to personal details

Change of address/marital status/name/gender

Note: Please complete the form electronically

Your previous personal details	
Vested benefits account No. (if known):
Surname:
First name:
Street, No.:
Postcode, town, country:
Tel.:
E-mail:
Date of birth:
Gender:	<input type="checkbox"/> M <input type="checkbox"/> F
OASI (AHV/AVS) No.:
Marital status:	<input type="checkbox"/> single
	<input type="checkbox"/> married/registered partnership since (date):
	<input type="checkbox"/> divorced/dissolved partnership since (date):
	<input type="checkbox"/> widowed since (date):

Your new personal details

Vested benefits account

No.:

.....

Surname:

.....

First name:

.....

Street, No.:

.....

Postcode, town, country:

.....

Tel.:

.....

E-mail:

.....

Date of birth:

.....

Gender:

M

F

OASI (AHV/AVS) No.:

.....

Marital status:

single

married/registered partnership since (date):

.....

divorced/dissolved partnership since (date):

.....

widowed since (date):

.....

Confirmation

I, as the account holder, hereby confirm with my signature that the information provided is complete and correct.

Surname, first name:

.....

Place, date:

.....

Signature:

.....

Documentation required

Please send us the following additional documents so that we can process your notification:

in the event of a change of address:

- *Copy of your OASI (AHV/AVS) card*

in the event of a change of marital status:

- *Copy of your OASI (AHV/AVS) card*
- *If you are married or in a registered partnership: copy of your marriage certificate/partnership certificate*
- *If you are divorced or your partnership has been dissolved: copy of the complete, legal divorce decree/decree dissolving your partnership*
- *If you are widowed: copy of your partner's death certificate*

in the event of a change of name:

- *Copy of your OASI (AHV/AVS) card*
- *Copy of an item of official evidence of the name change*

in the event of a change of gender:

- *Copy of your OASI (AHV/AVS) card*
- *Copy of an item of official evidence of the name change*

We may need additional information and documents. We will contact you if this is the case.