



Opening of a vested benefit account

Please submit the fully completed form along with the required documents to your pension fund.
Please fill in this form digitally or in clear block capitals.

Hello

Kindly transfer my vested benefits with the relevant leaving benefits statement to the following address:

Stiftung Auffangeinrichtung BVG

Vested benefits accounts

P.O. Box

8050 Zurich

Postfinance

IBAN: CH50 0900 0000 8001 30227

SWIFT / BIC: POFICHBEXXX

Instead of sending the data in paper form, it may be entered directly via the following link:
exchange.aeis.ch/onlineerfassung

Personal details

Surname			
First name			
Street, No.			
Postcode, town, country			
Date of birth		Gender	☐ f ☐ m
OASI (AHV/AVS) No.			
Contract/insurance number			

Thank you very much!

Account holder confirmation

By signing, I confirm that the information provided is complete and correct.

Surname, first name

Place, date

Signature