



Notification

Changes to personal details

Change of address, marital status, name, gender

Please fill in this form digitally or in clear block capitals.

Your previous personal details

Vested benefits account No. (if known) _____

Surname _____

First name _____

Street, No. _____

Postcode, town, country _____

Phone number _____ E-mail _____

Date of birth _____ Gender ☐ f ☐ m

OASI (AHV/AVS) No. _____

Marital status ☐ single

☐ married/registered since (date) _____
partnership

☐ divorced/dissolved since (date) _____
partnership

☐ widowed since (date) _____

Your new personal details

Surname			
First name			
Street, No.			
Postcode, town, country			
Phone number		E-mail	
Date of birth		Gender	☐ f ☐ m
OASI (AHV/AVS) No.			
Marital status	☐ single		
	☐ married/registered partnership	since (date)	
	☐ divorced/dissolved partnership	since (date)	
	☐ widowed	since (date)	

Account holder confirmation

By signing, I confirm 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 application:

in the event of a change of address:

- Copy of your identity card or passport

in the event of a change of marital status:

- Copy of your identity card or passport
- 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/decreed 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 identity card or passport
- Copy of an item of official evidence of the name change

in the event of a change of gender:

- Copy of your identity card or passport
- 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.



Stiftung Auffangeinrichtung BVG
Fondation institution supplétive LPP
Fondazione istituto collettore LPP

Confidential

Stiftung Auffangeinrichtung BVG
Vested benefits accounts
Elias-Canetti-Strasse 2
P.O. Box
8050 Zurich
SWITZERLAND

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SWITZERLAND

Please enclose this cover sheet with the documents you return to us. Thank you.

When returning your documents, please do not use paper clips, staples, or adhesive tape.

