

## Request for lump sum payment of retirement benefits

Last name	_____	First name	_____
Street/no..	_____	Postcode / place	_____
Date of birth	_ _ _ _ _ _ _	SC no.	_____
Sex	<input type="checkbox"/> Female <input type="checkbox"/> Male	Marital status	_____
Employer	_____	Contract no.	_____
Date of retirement	_ _ _ _ _ _ _		

According to the pension fund regulations valid at the time of my retirement, I herewith submit a request to Profond Pension Fund that:

- at the time of my retirement the entirety of my accrued retirement savings is paid out to me by means of a one-time lump sum
- at the time of my retirement \_\_\_\_\_ % of my accrued retirement savings are paid out to me by means of a one-time lump sum.
- at the time of my retirement CHF \_\_\_\_\_ of my accrued retirement savings are paid out to me by means of a one-time lump sum.

The part not withdrawn shall be converted into a retirement pension according to the provisions of the pension fund regulations valid at the time of my retirement.

If retirement benefits are reduced in accordance with article 34 of the pension fund regulations, this applies both to the pension and to the capital payment, which is reduced in the same proportion. In all other respects, the provisions of article 34 of our pension fund regulations apply.

In addition, we refer to the explanations in our information sheet "Retirement".

If you or your employer have purchased additional benefits, the resulting benefits must not be drawn from the pension in the form of a lump sum within the next three years (Art. 43 (5) of the Pension Fund Regulations of Profond and Art. 79b (3) BVG).

The insured person (and his/her spouse) acknowledges that once the cash payment has been processed, the pension cover is terminated and any and all claims to retiree's supplementary child's benefits, spouse's pensions and partner's pensions as well as orphan's pensions vis-à-vis Profond Pension Fund are satisfied accordingly.

**The request has to be submitted to Profond Pension Fund no later than the last day of the retirement month (see Art. 11 resp. Art. 21 of the Pension Regulations).** Married persons or persons living in a registered partnership must provide proof of the spouse's or registered partner's consent in the form of an officially certified signature\* and attach the certification to the application. All other insured persons must attach current proof of marital status (available from the municipality where you reside)\* to the application.

\* The proof of marital status and the official certification must not be more than 6 months old as of the date of retirement.

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of the insured person

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of the spouse/registered partner

\_\_\_\_\_  
Official certification of the signature of the spouse/registered partner (by notary or municipality)