

Application to pledge assets for home ownership

Insured person	
First name	Date of birth
Last name	AHV/AVS no.
Address	Marital status
Postcode/place	Tel.
E-mail	
Voluntary buy-in contributions/early with	ndrawals
☐ I have made a voluntary buy-in contribut	tion to the pension fund in the last three years.
☐ I have already made an early withdrawa encouragement scheme.	I or pledged vested benefits under the home ownership
If you tick one of these two boxes we will ha	ave to clarify the matter further.
Desired amount	
☐ I wish to pledge CHF	
☐ I wish to pledge my current and future cl (subject to the legal maximum)	laims to occupational benefits up to the value of my vested benefits
Pledgee (holder of pledge)	
Name	
Street address	Postcode/place
Address of property/new home address	
Street address	Postcode/place
Canton/country	Valid as of

Berufliche Vorsorge Prévoyance professionnelle Occupational pension



Form of owner	ship	
$\hfill\Box$ Sole owner		☐ Part owner
	20 / /	
☐ Joint owner	with spouse/partner	☐ Member of cooperative
Signature of s	pouse/partner	
Place and date		Signature of spouse/partner
	_	
Confirmation of	of accuracy	
I have read the	information leaflet and accept	t its terms. I also confirm that the information provided on this form
is true and accu	ırate, and that I am fully fit for	work.
Place/date	Signature of member	