

Amendment of personal data

Information about contract and insured person

Last name of insured person	Contract no.
<input type="text"/>	<input type="text" value="/"/>
Last name of insured person (as registered until now)	First name (until now)
<input type="text"/>	<input type="text"/>
AHV no. of the insured person	
<input type="text"/>	

Change of name

New name or correct name of insured person	Correct first name
<input type="text"/>	<input type="text"/>

Change of marital status

We require the precise date of marriage or registration from the registry office to enable us to determine your vested benefits at the time of marriage/registration of your partnership in accordance with the statutory provisions.

Date of change of marital status	New or correct marital status
<input type="text"/> <input type="text"/> <input type="text"/> Day Month Year	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> In a registered partnership <input type="checkbox"/> Dissolved partnership

Change in maintenance obligation

Date of change	<input type="checkbox"/> With maintenance obligation	<input type="checkbox"/> With no maintenance obligation
<input type="text"/> <input type="text"/> <input type="text"/> Day Month Year		

Change in salary/interruption in salary/change in degree of employment

If the employee has been employed by an employer for less than one year, the annual salary is deemed to be that which the employee would obtain for a whole year's employment (including any contractually agreed bonuses, 13th month's pay, etc.).

Date of change in salary	New annual salary for AHV purposes	New degree of employment
<input type="text"/> <input type="text"/> <input type="text"/> Day Month Year	<input type="text"/> in CHF	<input type="text"/> in %

Confirmation by employer or foundation

Place	Date	Stamp and signature of employer or foundation
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> Day Month Year	<input type="text"/>