Personalvorsorge Swissport Geschäftsstelle Postfach 8152 Glattbrugg

▶ not older than 30 days

• Current proof of civil status of the beneficiary person ▶ not older than 30 days



If you have any questions, please contact: • +41 43 210 18 14 • pension.pvs@pfs.ch		
Retirement/partial retire	ement	
Name	First name	
Street/No.		
Postcode/place/country		
Date of birth	Employee no.	
E-mail	Phone	
Retirement as of		
Degree of retirement in % (only required for par	tial retirement)	
Old-age pension or old-age capital		
	three years before retirement, a lump-sum payment is not allowed. The vriting to the pension fund before retirement and is irrevocable from that	
The state of the s	nimum amount is required per year (10% of the minimum AHV pension). n fund will make a one time lump-sum payment instead of installing a	
Lump-sum payment		
☐ Desired capital	CHF	
The state of the s	Il claims towards the occupational benefits institution are settled; there ildren's pensions, survivors' benefits). In the case of a partial lump-sum dingly.	
<ul><li>not older than 30 days</li><li>Current proof of civil status of the bene</li></ul>	s) / family record book (married persons)  ficiary person ▶ not older than 30 days registered partner or partner who is a beneficiary	
Old-age pension		
☐ Life-long old-age pension (100%)		
☐ Partial life-long old-age pension per year	CHF	
Required documents:  • Proof of civil status (unmarried persons	s) / family record book (married persons)	

## Children's pension

The recipients of an old-age pension are entitled to a children's pension

- a) until the child reaches the age of 18 years
- b) after the child has completed 18 years of age, at the latest until the age of 25, as long as the child is still enrolled in studies

Information about the entitled children:

Name	First name	Date of birth
Required documents:		
•	ook, including date of birth of all children entitled to pen	sion ▶ not older than 30 day

• Current certificate of studies for all children as of 18 years ▶ not older than 30 days

Payment address	
Name of bank and full address	
IBAN/SWIFT	
Signature/Confirmation	
Place/date	Signature of the insured person
▼ Attention: Only required if lump-sum pay	/ment / partial lump-sum payment! ▼

Officially certified signature (the certification must be done on this form, for example on the back)

Place/date

Officially certified signature of spouse/registered partner or partner who is a beneficiary