

Vested Benefits Foundation of UBS AG

P.O. Box CH-8098 Zurich Tel. +41-61-226 75 75

ubs.com/vb

Vested Benefits Foundation of UBS AG P.O. Box CH-8098 Zurich

Vested benefits account	
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Transfer to a pension fund or vested benefits foundation

Personal data of pension account holder ¹	
Last name	First name(s)
Street, no.	Postal code, city
Date of birth (dd.mm.yyyy)	AHV number / Social security number (756.xxxx.xxxx.xxx)
Phone no.	-
Transfer reason (specifying the documents that must be submit	ted)
In principle, the pension account holder is legally obligated to transfer transfer to a vested benefits foundation is only allowed if it is not poss	the vested benefits into the pension fund (art. 3 para. 1 FZG/VBA). The ible to make a transfer to the current pension fund.
On receipt, the processing time may be up to 20 working days. The do	ocuments submitted will not be returned. Copies are accepted.
☐ Transfer to a pension fund	
The QR-bill (payment slip) of the pension fund must be inclu	uded.
Full balance	
Partial transfer: current confirmation of purchase (incl. maxim	um amount) or current pension fund statement
Name of pension fund	
Starting date at new employer	Employer / Reference / Contract number / Personal number
☐ Transfer to a vested benefits foundation in Switzerland (ves	sted benefits account or policy)
Name of vested benefits foundation	
– Account opening confirmation of the new vested benefits found – QR-bill (payment slip) / bank details of the new vested benefits f	
☐ Divorce / Legally dissolved partnership	
 Copy of a legally binding Swiss divorce decree / Swiss dissolutior QR-bill (payment slip) / bank details of vested benefits foundatio 	n judgement n / pension fund of the ex-partner

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Vested	benefits	account
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Place

UBS Vitainvest Funds / CSA Mixta-BVG investment groups
Investments in securities will be sold in the required amount by the transfer date. A separate securities order is required by means of the appropriate <u>form</u> if the investments in securities should be sold immediately, i. e. prior to the transfer date.
The pension account holder hereby
 confirms that this application and the documentation provided are correct and complete. authorizes the Vested Benefits Foundation of UBS AG to make any other enquiries that may be necessary.

Signature of pension account holder

Date (dd.mm.yyyy)

¹The singular form also includes the plural, and all masculine terms referring to persons refer to persons of both genders.

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