



# Departure from the employee pension plan

## 1 Personal details

Name of the employer and contract number	
Last name	First name
Street, no.	Zip code, town or city, country
Private telephone	Private e-mail
Marital status <input type="radio"/> single <input type="radio"/> married <input type="radio"/> divorced <input type="radio"/> widowed <input type="radio"/> registered partnership <input type="radio"/> dissolved partnership	

Please note before filling out the form:

If the employee aged 58 or older has already decided on early retirement please fill out the form «Notification of retirement or partial retirement.»

## 2 Departure details

Departure date
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◀ The departure date is always the last day of employment, which is generally the last day of the month. Do not deduct leave entitlements.

## 3 Details regarding capacity to work

Is the departing person healthy / able to work as of the date of departure?

No |  Yes

## 4 Use of termination benefit

Is the new pension fund / vested benefits institution known?

No |  Yes

Please inform us via e-mail of the new pension or vested benefit institution, including account details, for the remittance. The insured will be contacted directly by Vita.

Please send the completed form to:

**Zurich Insurance Company Ltd  
Help Point BVG  
P. O. Box  
8085 Zurich  
bvg@zurich.ch**

Once we have checked your notification, you will receive the new contribution statement. We will also transfer the termination benefit and send your employee a termination statement.

## 5 Confirmation by employer

The employer confirms that they have properly reported all changes in personal data (e.g. changes in salary or marital status).

Place and date	Signature of the employer
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Do you have any questions about this form?

Help Point BVG (phone 0800 80 80 80) is available to answer your questions from 8 a. m. to 6 p. m. from Monday to Friday.