

Application for an advance withdrawal for home ownership



Please complete this form in full, sign it and submit it together with the required documents.

1. Details of the insured person

IBAN VB account		Date of birth	
First names		Street / No.	
Surname		Postcode / Town	
AHV number		Email	
Marital status		Telephone no.	
Country		Gender	☐ m ☐ f

2. Payment details

Payments will be made exclusively into a designated/restricted account held in the name of the pension scheme member.

Amount	☐ Maximum permitted payout amount	☐ Other amount: CHF	
Payee ((seller, creditor, mortgage lender))			
IBAN			
Bank / Institution			
Account holder			

3. Purpose of payment

I will use the pension savings for

- | | |
|---|---|
| ☐ the purchase of a home | ☐ repayment of mortgage loans |
| ☐ the construction of residential property | ☐ a share in residential property (e.g. a housing cooperative) |
| ☐ value-enhancing renovation or conversion | |

4. Previous use

I have previously used my occupational pension scheme in the following way:

- ☐ early withdrawal
☐ pledge

Date		Amount in CHF	
Secured creditor			

5. Property

The residential property is ☐ a detached house ☐ a flat and it is (or will be) situated at my civil law domicile or habitual residence and is (or will be) occupied by myself.

Street, No.

Postcode, town

Country

6. Owner

I am (or will be)

☐ sole owner

☐ Joint owner with spouse

☐ Holder of a share in residential property

(e.g. holder of shares in a housing cooperative)

☐ Co-owner (share in %:)

☐ Holders of an independent and permanent building lease

7. Enclosures

Upon purchase of residential property ¹	- A notarised purchase agreement or a draft thereof - Confirmation of the intended use - Land registry extract (not more than 1 year old) - Current certificate of residence, not more than 3 months old
When building residential property ¹	- Notarised contract of sale for the plot of land - Confirmation of the intended use - Current certificate of residence, not older than 3 months
In the case of repayment ¹	- Land registry extract (not older than 1 year) - Confirmation of the intended use - Current certificate of residence, not older than 3 months
In the case of a shareholding ¹	- Share certificate (original) with articles of association - Confirmation of the intended use - Current certificate of residence, not older than 3 months
For renovations ¹	- Land registry extract (not older than 1 year) - Quotations from tradespeople (not invoices) - Confirmation of the purpose of the payment - Current certificate of residence, not older than 3 months

¹ Proof of marital status:

- Single or widowed persons must submit a current certificate of marital status, not older than 3 months.
- For married persons or those in a registered partnership, an officially certified signature from the spouse or registered partner is mandatory.
- For divorced persons or those whose registered partnership has been dissolved by a court, a copy of the divorce decree or the order dissolving the registered partnership, as well as a current certificate of marital status, not older than 3 months, must be submitted.

8. Notes

Further information on home ownership support can be found in our relevant information sheet. Please note that fees apply. The fees are clearly set out in the currently valid Fees and Charges Regulations on the Foundation's website.

9. Declaration

I confirm that the above details and the documents submitted are correct and complete. I authorise the HBL Vested Benefits Foundation ('the Foundation') to carry out further enquiries if necessary. I acknowledge that the 30-day payment period begins once all the required documents have been received by the Foundation. By submitting this application, I am also instructing the Foundation to sell my securities portfolio. The proceeds of the sale are to be credited to my vested benefits account until the payment is made. In the event that the payment cannot be authorised or I subsequently withdraw this application, the proceeds of the sale will remain in my vested benefits account, unless I provide written instructions to the contrary. Any instruction to reinvest or to withdraw this application must be given in writing; instructions in any other form shall not be binding on the Foundation. I acknowledge that the vested benefits account will be closed following the payment of the full amount.

10. Declaration and signature of the pension beneficiary

I confirm that the information I have provided is complete and true. I am aware of the tax implications of the payout. Furthermore, I have taken note that any further early withdrawal will only be possible after a period of at least 5 years.

Place / Date _____

Signature _____

Official certification of the above signature:

Certifications in Switzerland: local authority, notary (with stamp, name and legally valid signature)

11. Spouse's/registered partner's signature

Signature _____

Official certification of the above signature:

Certifications in Switzerland: local authority, notary (with stamp, name and legally valid signature)

Please send us this form together with all the required supporting documents to the following address:

HBL Freizügigkeitsstiftung
Postfach
5600 Lenzburg