

Confirmation of partnership

Account/Deposit	Client/Portfolionumber	
Client	Name	First name
	Insurance number (AHV/AVS)	
Partner	Name	First name
	Insurance number (AHV/AVS)	
Address	Street, N°	Postal code, place
	Start date of partnership	
Designation	Account-holder acknowledges that, in the event of his/her death, his/her partner will be the entitled beneficiary in accordance with statutory and regulatory prescriptions. The Foundation only verifies after death whether the regulatory conditions for entitlement are met. The regulatory and statutory provisions in force at the time of death are authoritative.	
Qualifying partnership	 The qualifying entitlement to a partner's pension shall only exist if, at the Account-holder's death: a) both partners were unmarried and were not bound by a registered partnership (PartG/LPart); and b) the partners were not related to one another; and c) in the five years immediately preceding the Account-holder's death, the partners shared a common life without any interruption; or the surviving partner was significantly dependent on the deceased, or must provide maintenance for one or more of both their children; and d) the Account-holder declared the partnership to the Foundation in writing during his/her lifetime. 	
Declaration and confirmation	 The Account-holder hereby declares his/her partnership with the above-designated partner and confirms that: he/she is not related to the designated partner; and both partners are unmarried and are not bound by a registered partnership (PartG/LPart); and they share a common life; and moreover (in addition, if applicable): the partner is dependent to a significant degree on the Account-holder; the designated partner must provide maintenance for one or more of both their children. (please tick the applicable box, depending on the actual circumstances, you may tick several boxes) The undersigned both confirm the existence of a partnership within the above-defined meaning. 	
Documents to be delivered	The following documents must be delivered: Copy of passport or ID for both persons	
Signature	Place, date	Client signature
	Place, date	Partner signature