

Notification of cohabitation

Art. 27 of the Pension Fund Regulations: Partner's pension

You will find important details of this topic in our "Information sheet on cohabitation/lump sum payable at death/additional lump sum payable at death"

Details of the insured person

Last name _____ First name _____
Address _____ Postcode, city _____
SC no. _____ Employer _____

Details of cohabitee

On the basis of Art. 27 of the Pension Fund Regulations of Profond, in the event of my death I wish the partner's pension to be paid to my cohabitee:

Last name _____ First name _____
Address _____ Postcode, city _____
Date of birth [| . | . | . | . | . | . | . |] Country _____

Confirmation

I am aware that Profond is entitled to demand further documents as proof of fulfilment of the regulatory and legal conditions (official confirmation of place of residence, cohabitation agreement, etc.).

Place, date

Signature of the insured person
