PENSION DEMAND FORM

→ Send to CPIC at least 3 months before the due date of payment of the pension (see below)

Complete and return by e-mail to cpic@cpic.ch or postal mail (address at the bottom):

IMMEDIATE PAYMENT OF A RETIREMENT PENSION ending CPIC membership

•	Ordinary retirement pension
•	Surname, name :
•	CPIC Beneficiary's number: I
•	Date of birth :
•	Civil status :
•	Nationality:
•	Address:
•	Photocopy of passport or identity card (to join)
•	Due date of payment of the pension:
•	Amount to be converted into a pension (one-off premium): EUROS/CHF
	☐ Whole capital
	Part of the capital :
•	Beneficiary's personal bank account onto which the pension as well as any balance of his/her
	capital will be paid
	Bank:
	Address:
	IBAN code:
	BIC/SWIFT code:
<u>w</u>	ith reversion
•	Surname, name of the spouse or the civil partner:
•	Date of birth :
•	Nationality:
•	Address:

Photocopy of passport or identity card (to join)