

Notification / confirmation of the life partnership

Notification of the eligible life partner

According to **Fehler! Verweisquelle konnte nicht gefunden werden.** of the Regulations, the life partner (of the same or opposite gender) notified by the insured person is entitled to a survivor's pension equalling the amount of the spouse's pension, provided that:

- a. the life partner demonstrably lived in the same household at the same official place of residence in a fixed and exclusive relationship with the insured person, and
- b. the insured person and the beneficiary were both unmarried or not united in a registered partnership and were not related as defined in Art. 95 of the Swiss Civil Code (ZGB), and
- c. the life partner was either older than 45 and the life partnership pursuant to para. a) lasted without interruption for at least the last 5 years, or the registered life partner is responsible for the maintenance of at least one joint child who is entitled to an orphan's pension from the Pension Fund, and

The insured person and the entitled life partner confirm by their signatures below that the conditions for entitlement pursuant to paras. a) and b) are fulfilled.

According to **Fehler! Verweisquelle konnte nicht gefunden werden.** para. 3 of the Regulations, the Pension Fund will check the documents to be submitted by the life partner (certificate of residence, family register, ...) in the event of a pension claim to make sure that all the conditions for a life partner's pension have been met. If the requirements are not fulfilled (e.g. because the current life partner has not been registered as a beneficiary or the life partnership has not yet been in existence for 5 years), there is no entitlement to a life partner's pension.

	Insured person	Entitled life partner
Surname, first name		
Date of birth		
Date, signature		

For current life partner's pensions

The life partner's pension ends when the pension recipient marries, enters into a new life partnership or dies. The life partner who receives a pension hereby confirms that the conditions for the continued payment of a life partner pension are fulfilled. This confirmation must be submitted **annually**. Wrongfully received benefits may be reclaimed (see Art. 42, para. 2).

	Pension recipient
Surname, first name	
Date of birth	
Date, signature	