

Transfer or repayment of advance withdrawal for home ownership

Employer **Contract no.**

Insured Person

Mr Ms

Surname First name

Street Postcode, Place

Telephone W Telephone H

E-Mail Date of Birth

Insured no.

Are you fully able to work? Yes No

I am currently employed and not under notice of redundancy. Yes No

Marital status Single Married Separated Divorced Widowed

Partial repayment Yes No (if no, please complete A) or B) below)

Date of repayment Amount

Min. CHF 10,000

I request Tellico pk, 6431 Schwyz, as my current insurer, to arrange for the amendments specified below to be made in the land registry.

A) Cancellation and new registration of a sale restriction

Sale of the current property and purchase of a new property to serve as the main residence

(expected) Date of sale of current property

(expected) Date of purchase of new property

Documents to be enclosed: Land registry record of the current property ;

Land registry record of the new property, purchase agreement for the new property

B) Cancellation of the sale restriction as a result of

Full repayment of the advance withdrawal

By my signature I confirm that with this repayment, all advance withdrawals ever made from vested benefits foundations and pension funds have been settled.

Incurrence of claim

Cash payment of vested benefits

Reaching the age limit

Documents to be enclosed: land registry record, address and telephone number of the pension fund/vested benefit foundation from which the advance withdrawals were made

I hereby agree to bear any costs arising from the land registry amendments.

Signatures

Place, Date Agreement of owner / s