

Application for cohabitant's pension

Employer	_____	Contract No.	_____
Surname	_____	First name	_____
Street	_____	Postcode/Town	_____
Date of birth	_____	Material status/Date	_____ / _____
E-Mail	_____	Phone	_____

Cohabitant application

In the knowledge of article 26 (cohabitant's pension) of the Pension Fund Regulations the insured person applies to register the following entitled cohabitant:

Cohabitant

Surname	_____	First name	_____
Street	_____	Postcode/Town	_____
Date of birth	_____	Material status/Date	_____
E-Mail	_____	Phone	_____

This application is also considered as a favour for the lump-sum death benefit (acc. article 30)

Conditions for a civil partnership constituting entitlement

A cohabitant's pension will only be paid if, in addition to the conditions set out in Article 26.1. of the Pension Fund and Organisational Regulations, at least one of the following conditions is met:

- the cohabitant was provided for to a significant degree by the insured person at least over the course of the past five years prior to the latter's death.
Substantial financial support received since: _____
- the cohabitant lived with the insured person in a consensual union without interruption at least over the past five years up to the latter's death and shared a common domicile, insofar as this was possible based on health-related considerations.
Common domicile since: _____
- the cohabitant is responsible for providing financial support for one or more joint children.

The insured person and his partner taken note of the relevant provisions of the Pension Fund and Organisational Regulations and expressly acknowledge the conditions specified therein. It is only on the occurrence of an insured event that the foundation is able to verify whether or not all the conditions for entitlement to benefits have been met. The burden of proof for the fulfilment of the eligibility requirements lies with the surviving partner. The claim must be submitted to the Foundation within 4 months of the death of the insured person. Otherwise, the entitlement to the life partner's pension shall lapse.

Date

Signature of insured person

Signature of cohabitant