

Hints for filling in the form

**Range of services for natural persons** **PostFinance**

Partner number\* \_\_\_\_\_ Order number \_\_\_\_\_  
\* optional information

**Customer data**

<b>Customer</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">1</span>		<b>Additional customer (for partner account)</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2</span>	
<input checked="" type="checkbox"/> Mr <input type="checkbox"/> Ms		<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> same address as customer 1	
Name	<b>Mustermann</b>	Name	_____
First name	<b>Peter</b>	First name	_____
Street, no.	<b>Thunstrasse 12</b>	Street, no.	_____
Postcode	<b>3123</b>	Postcode	_____
Location	<b>Belp</b>	Location	_____
Country	<b>CH</b>	Country	_____
Date of birth	<b>18.02.1960</b>	Date of birth	_____
Nationality	<input checked="" type="checkbox"/> CH	Nationality	<input type="checkbox"/> CH
other _____		other _____	
Residence permit	_____	Residence permit	_____
Telephone (home)	<b>031 990 12 10</b>	Telephone (home)	_____
Telephone (work)	<b>031 990 12 12</b>	Telephone (work)	_____
E-mail	_____	E-mail	_____
Profession	<b>Commercial Assistant</b>	Profession	_____
Employer	<b>Mustermann Ltd</b>	Employer	_____
Gross annual income	<input type="checkbox"/> CHF 0 – CHF 29,999	Gross annual income	<input type="checkbox"/> CHF 0 – CHF 29,999
Occupation, employer and gross annual income are always required to open a new account.	<input type="checkbox"/> CHF 30,000 – CHF 74,999		<input type="checkbox"/> CHF 30,000 – CHF 74,999
	<input checked="" type="checkbox"/> CHF 75,000 – CHF 149,999		<input type="checkbox"/> CHF 75,000 – CHF 149,999
	<input type="checkbox"/> CHF 150,000 – CHF 249,999		<input type="checkbox"/> CHF 150,000 – CHF 249,999
	<input type="checkbox"/> CHF 250,000 and over		<input type="checkbox"/> CHF 250,000 and over

**1** Language of correspondence  G  F  I  E

**2**  I am already a customer and use the following products/services:  
Account number/IBAN \_\_\_\_\_

I am not yet a customer.

**Other correspondence address**

Mr  Ms

Name \_\_\_\_\_ First name \_\_\_\_\_  
Street, no. \_\_\_\_\_ P.O. Box \_\_\_\_\_  
Postcode \_\_\_\_\_ Location \_\_\_\_\_  
Country  CH other \_\_\_\_\_

**Choice of service**

**Banking package**

Banking package Smart  Banking package SmartPlus  
 Paper option  
Fee debit account existing account \_\_\_\_\_  new account

TALOR ENF 000036.00

The services form is intended to help with selecting PostFinance services.

**Please complete legibly and in full**  
Please write in clearly legible block capitals, keep within the fields, and use a black or blue felt pen or ballpoint pen. Please check that all the fields are complete and that the necessary details have been added. A power of attorney that is incomplete or which contains mistakes cannot be accepted.

**1 Personal details**  
Due to regulatory provisions, PostFinance Ltd is obliged to obtain additional information from customers when beginning a new business relationship. Please provide full details of your profession, employer and gross annual income. If the details are incomplete or incorrect, an account cannot be opened.

**2 You are already a PostFinance customer**  
Please mark the services you already use and add the account numbers.

**3 Account directory**  
Please mark here if we may publish your account in the account directory. Only employees of Swiss Post branches may consult master data (comprising last name, first name, place of residence, account number and account currency) in the account directory in order to simplify payment transactions with you.

**4 Signatures**  
The customer signs here; the legal guardian/ depositor also signs if the customer is a minor or is under guardianship.

**Please note**  
For details of fees, commissions and other charges please see the brochure entitled "Prices and conditions for private customers" or visit our website [www.postfinance.ch](http://www.postfinance.ch).

**Account for payment transactions**

**Currency**  
 CHF  EUR  \_\_\_\_\_

**Overdraft option**  
 yes  no

**PostFinance Card**  
 in the name of customer 1 **3**  The account number may be published in the account directory which is not publicly available  
 in the name of customer 2

**Savings account**

**Currency**  
 CHF  EUR

**Card**  
 I would like an account card  
 in the name of customer 1  in the name of customer 2  
 I would like to access my savings account with my PostFinance Card (applies only to withdrawals at Postomats)

**E-finance for online account management**

E-finance (new subscription)  
 For one user, in the name of  Customer 1  Customer 2  
 For two users (for partner account)  
 Activate the newly opened accounts/custody accounts with the current e-finance subscriber number No. \_\_\_\_\_

**Data protection**  
Information on how PostFinance processes your personal data can be found in the "Information on data protection" enclosure or in our privacy policy at [postfinance.ch/dps](http://postfinance.ch/dps).

**What you have to do when sending us personal data about other people**  
By sending us data about other people, you confirm that you are authorized to do so and that the data is correct. Before you send the data to us, please ensure that the relevant third parties have been informed that we will process their data and forward them a copy of the enclosed "Information on data protection" document or our Privacy Policy, which you can find at [postfinance.ch/dps](http://postfinance.ch/dps).

**Comments**  
\_\_\_\_\_  
\_\_\_\_\_

Date **16.08.2023**

Customer's signature 1 \_\_\_\_\_ Customer's signature 2\* \_\_\_\_\_

**4**

\* Signature of legal representative, if customer 1 is a minor or has been placed under guardianship.

Please send the form to: PostFinance Ltd, Scan Center, 3002 Bern

**Do you have any questions?**  
If you have any questions about filling in the form, please contact your nearest PostFinance branch or post office or call us on 0848 888 700 (regular rate).