

Range of services for natural persons

Partner number* _____

Order number _____

* optional information

Customer data

Customer ①	Additional customer (for partner account) ②
<input type="checkbox"/> Mr <input type="checkbox"/> Ms	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> same address as customer 1
Name _____	Name _____
First name _____	First name _____
Street, no. _____	Street, no. _____
Postcode _____	Postcode _____
Location _____	Location _____
Country _____	Country _____
Date of birth _____	Date of birth _____
Nationality <input type="checkbox"/> CH	Nationality <input type="checkbox"/> CH
other _____	other _____
Residence permit _____	Residence permit _____
Telephone (home) _____	Telephone (home) _____
Telephone (work) _____	Telephone (work) _____
E-mail _____	E-mail _____
Profession _____	Profession _____
Employer _____	Employer _____
Gross annual income <input type="checkbox"/> CHF 0 – CHF 29,999	Gross annual income <input type="checkbox"/> CHF 0 – CHF 29,999
<input type="checkbox"/> CHF 30,000 – CHF 74,999	<input type="checkbox"/> CHF 30,000 – CHF 74,999
<input 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

Language of correspondence G F I E

I am already a customer and use the following products/services:

Account number/IBAN _____

I am not yet a customer.

Other correspondence address

<input type="checkbox"/> Mr <input type="checkbox"/> Ms	
Name _____	First name _____
Street, no. _____	P.O. Box _____
Postcode _____	Location _____
Country <input type="checkbox"/> CH other _____	

Choice of service

Banking package

<input type="checkbox"/> Banking package Smart	<input type="checkbox"/> Banking package SmartPlus
<input type="checkbox"/> Paper option	
Fee debit account existing account _____	<input type="checkbox"/> new account



Account for payment transactions

Currency

CHF EUR _____

Overdraft option

yes no

PostFinance Card Direct

(for cash withdrawals, pay in shops / at filling stations)

in the name of customer 1
 in the name of customer 2

Services

I would like to receive payment order forms
 The account number may be published in the account directory which is not publicly available

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. _____

Comments

Date _____

Customer's signature 1



Customer's signature 2*



L

J

L

J

* 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 Berne

To be completed by PostFinance

Financial data			Stamp
Concluding office	Locality code	Staff number	
<input type="checkbox"/> PF branch	<input type="checkbox"/> Post office	<input type="checkbox"/> _____	
Additional information for opening an account for a Swiss Post Group employee			Proof of training
Staff number	_____		<input type="checkbox"/> submitted. Valid until _____
Customer is	<input type="checkbox"/> employee	<input type="checkbox"/> retired employee	

