

Form for change of address

Old address

Mr Ms

Company:

Last name:

First name:

Street/no.:

Postal code/city:

Country:

Date of birth:

Tel. private:

Tel. business:

New address

Mr Ms

Company:

Last name:

First name:

Street/no.:

Postal code/city:

Country:

Date of birth:

Tel. private:

Tel. business:

E-mail:

Valid from:

Change of address applies for

Client number:

Residential address/domicile

Correspondence address

If you are the holder of a joint account, please provide the following information:

The change of address applies for all account holders

The change of address applies for the following account holder(s) only:

Additional remarks

Place and date

Signature of account holder¹

Please sign and send to:

Bank CIC (Switzerland) Ltd.
CA
Marktplatz 13
P.O. Box 216
4001 Basel

¹ As per signature regulations