

# Insurance certificate application form



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## Note

All information on the insurance certificate can also be found on your health insurance card. Registration for an insurance certificate is therefore only required for persons who do not have a Swiss health insurance card (e.g. cross-border commuters or people who move to Switzerland from abroad).

## 1. Applicant details

### 1.1 Last name

### 1.2 Maiden name

### 1.3 All first names

given name in capitals

### 1.4 Date of birth

dd, mm, yyyy

### 1.5 Social Security Number if known

13 digits, enter number without dots or spaces.

You can find your Social Security number also on your swiss health insurance card.

### 1.6 Sex

male  female

### 1.7 Address

Street, number

Postcode, town

Phone / Mobile

E-mail

### 1.8 Nationality

### 1.9 Place and country of birth

## 2. Parents' details

### 2.1 Mother's Last name

including name prior to marriage / registered partnership

### 2.2 All first names

given name in capitals

**2.3 Father's Last name**

including name prior to marriage / registered partnership

**2.4 All first names**

given name in capitals

**3. Reason for application**

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- Cross-border commuters
- Move to Switzerland from abroad
- Change in personal details (only for non-Swiss residents)
- Other

Please fill in

**4. Signature**

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I, the undersigned, hereby confirm that the information herein provided is accurate and complete.

Place and date

Signature of the insured

Employer / local AHV office

Place and date

Stamp, address and signature of the employer or local AHV office

AHV Account Number / Social Security Number

**Please do not tack the documents together.**

**Enclosed:**

- Copies of ID papers (e.g. family record book, certificate of marital status/family certificate, residence or work permit, passport, ID, foreign ID)