Application for release from insurance obligation pursuant to KVG (Swiss Federal Law on Health Insurance)

1. Applicant

Surname

First name

Street/no.

Postcode/town

Date of birth

E-Mail

Nationality

Tel.no.

Residence permit

☐ C   ☐ B   ☐ L   ☐ G

Valid until

2. Spouse and children living in Switzerland

1. Person

Surname/First name	Date of birth	Relationship (spouse, child)

2. Person

Surname/First name	Date of birth	Relationship (spouse, child)

3. Person

Surname/First name	Date of birth	Relationship (spouse, child)

3. Type of sojourn in Switzerland

Student		Not gainfully employed	
☐ from (D,M,Y)	until	☐ from (D,M,Y)	until

Employee on international assignment

☐

Intern

☐   from (D,M,Y)   until

Employee

☐

Cross-border commuter

☐

Self-employed individual

☐

Pensioner

☐

Name and address of employer of training centre in Switzerland and/or abroad

4. Health insurance in Switzerland and/or abroad

Name of health insurance

Do you have Swiss health insurance

☐ yes, since   ☐ no

5. Confirmation

It is expressly acknowledged that individuals who do not have Swiss health insurance do not have **any claims** against the compulsory health insurance pursuant to the KVG.

The **accuracy** of the information is confirmed:

Place/date   Signature

The following documents are required for reviewing the application

- Copy of residence permit
- Confirmation from university or school (students)
- Pension certificate (pensioners)
- Intership agreement (interns)

- Statutory insurance   ⇨ Copy of European health insurance card
- Private insurance   ⇨ Confirmation of insurance on website of WAS Compensation Fund Lucerne

The application must be submitted via the AHV compensation office or the residents' registration authority at your place of residence