

**OFFICE CANTONAL DES
ASSURANCES SOCIALES**
Caisse de compensation
Division de la perception
Service administratif

APPLICATION FOR EXEMPTION FROM PAYMENT OF SWISS SOCIAL SECURITY CONTRIBUTIONS FOR PRIVATE HOUSEHOLD EMPLOYEES WITH EQUIVALENT COVERAGE ABROAD

Information about the person applying for exemption:

1. Surname: First name(s):

2. Date of birth: Nationality:

3. Address:

4. Surname, first name and address of your employer:

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5. Start date of your employment in the Canton of Geneva:

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Foreign social security institution:

6. With which foreign social security institution are you insured ? :

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7. Since what date ? :

.....

Geneva, (date)..... Signature:

Documents to submit with the application:

Original proof of payment of contributions paid to the foreign official insurance institution stating the amounts paid and covering the period from the date you took up employment in the Canton of Geneva.

NB: This application for exemption from Swiss social security contributions must be signed by the private household employee him/herself. The employer is not entitled to apply for exemption on their employee's behalf.

For more information, please consult the "Manual: Private servants - Private Household Employees Ordinance of 6 June 2011" on the website of the Federal Department of Foreign Affairs at:

<http://www.eda.admin.ch/missions/mission-onu-geneve/en/home/activites-etat-hote/introduction/privaten-hausangestellten-verordnung.html>