

PO Box 1246 Sutherland House Russell Way Crawley
RH10 0HZ
www.equiniti.com
Tele: 0345 121 2514

Pension Reference:

Application for payment of pension in EUR currency by direct deposit to: Belgium

Part 1 - Personal Details				
Forename:	Family nam	e:		
Address:				
Contact Telephone Number:				
Part 2 – Overseas Bank	Details - Please co	mnlete in full		
Full Name of Bank or Financi		inpiete in run		
Full Address of Bank or Finar	cial Institution:			
Full name of the beneficiary a	ccount holder (as quoted	on the account) - ι	up to 35 alphabetic c	haracters
including spaces:			· ·	
Bank Identification Code (Swift BIC) (full 11 characte	r RIC required - if 8 ch	paracters last 3 = XX	X)
Jan Idonaida Gasa (JWII 210) (Iaii 11 Olidiasis	The required in Case		Λ,
nternational Bank Accoun	Number IBAN (16 continue)	nuous alpha/numeric cl	haracters)	г г
BE				
Account Type				
(0 = Cheque/Current, 1 = Savings)				
Part 3 - Please sign below:				
Signed:	Da	te:		
oiga.				
By signing this Form you consent to	the processing of your persona	ldata (i.e. name laddr	ess hank account a	and navment
details) by third party banking agent you should be aware that data is ne	s over which the Equiniti Group	and the Payment Age	ent have no control. I	n addition
certain jurisdictions Equiniti Group a and address, to comply with local at	nd/or the Payment Agent may b	e required to provide		