Pension Reference: **Service Number:** **National Insurance:**

Application for payment of pension in ISK currency by direct deposit to: **Iceland**

Part 1 - Personal Details – Please complete in full

Forename:	Family name:
Address:	
Contact Telephone Number:	

Part 2 – Overseas Bank Details – Please complete in full

Full Name of Bank or Financial Institution:
Full Address of Bank or Financial Institution:
Full name of the beneficiary account holder (as quoted on the account) - up to 35 alphabetic characters including spaces

Bank Identification Code (Swift BIC) (full 11 character BIC required - if 8 characters last 3 = XXX)

International Bank Account Number (IBAN) (26 continuous alpha/numeric characters)

I	S																							

Account Type
(0 = Cheque/Current, 1 = Savings)

Domicile Status
(R = Resident, N = Non-Resident)

Part 3 – Please sign below:

Signed: **Date:**

By signing this Form you consent to the processing of your personal data (i.e. name, address, bank account and payment details) by third party banking agents over which the Equiniti Group and the Payment Agent have no control. In addition you should be aware that data is necessarily transmitted outside the UK, where Data Protection controls may differ. In certain jurisdictions Equiniti Group and/or the Payment Agent may be required to provide details such as your full name and address, to comply with local anti-money laundering or anti-terrorism requirements.