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

Application for payment of pension in CAD currency by direct deposit to: **Canada**

**Part 1 - Personal Details – Please complete in full**

|  |  |
| --- | --- |
| Forename:  | Family name: |
| Home Address *(PO Box addresses are not acceptable). This is now mandatory* |
| 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 account holder (as quoted on the bank account) Max 30 characters |
|  |

Account Number

(Maximum 12 characters – No hyphens or slashes to be entered)

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |

If your number is less than 12 digits, fill from the left and leave spaces at the right hand end.

*(Xafinity Paymaster please ignore Modulus check)*

|  |  |
| --- | --- |
| Bank Number | Transit Number |
| **0** |  |  |  |  |  |  |  |  |

Bank number is 4 digits, usually 3 digits with a leading 0, Transit number is 5 digits – no alpha or special characters

**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. |

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