



# International Pensions

## Direct Payment request to Norway

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### Other ways to communicate with us

If you need braille, British Sign Language, a hearing loop, translations, large print, Easy Read, audio or something else, please contact us on +44 191 218 7777.

If you use Relay UK dial +44 151 494 1260 and when asked, give our telephone number.

### About this form

Fill in this form to tell us where you want us to send your direct payment using **black ink** and CAPITALS.

If you want more information about anything in this form, please get in touch with us.

The phone number is +44 191 218 7777 and our address is:

The Pension Service 11  
Mail Handling Site A  
Wolverhampton  
WV98 1LW  
United Kingdom

You can email us at **[tvp.internationalqueries@dwp.gov.uk](mailto:tvp.internationalqueries@dwp.gov.uk)** for general enquiries.  
We cannot use email for personal information.

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## About you

**01 Title**

Mr, Mrs, Miss, Ms or other

**02 First name****03 Middle names, if you have any****04 Last name****05 National Insurance (NI) number**

If you do not know your NI number,  
have you ever had one or used one at  
any time?

No

Yes

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## More information about you

**06 All other last names you have been  
known by or are using now.**

Include maiden name, all former married  
names and all changes of family name.

**07 Date of birth**

DD/MM/YYYY

**08 Phone number**

Add your national and local area code.

**09 What is this number?**

Home

Work

Mobile

**10 Address where you live**

This cannot be a PO Box. Include full  
address and country.

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## About your bank or financial institution

**You will be paid directly to your account.** It is very important that you give us all the information we ask for and you check with your bank that the details you give us are correct.

If you tell us the wrong account details your payment may be delayed or lost.

|                                                                                                                                  |                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div><b>11</b> Bank or financial institution's full name</div> <div><b>12</b> Bank or financial institution's full address</div> | <div><b>13</b> Bank Identification Code (BIC)<br/>Fill in from the left. This will be 8 or 11 characters.</div> <div><b>14</b> Account type<br/>Savings<br/>Checking</div> <div><b>15</b> I would like to be paid at the end of every<br/>4 weeks<br/>13 weeks</div> |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**16** Name of the account holder  
Maximum 35 characters including spaces.

**17** Bank code  
Must be 4 digits.

**18** Bank Account Number  
Must be 7 digits. No hyphens, slashes or spaces.

**19** International Bank Account Number (IBAN)  
Must be 31 characters. No hyphens, slashes or spaces.

If you have a cheque book for your account please attach a paying-in slip to this form. This will help us to confirm your details.



**You must tell us straight away if your bank or account details change.  
If you do not, your payments will be delayed.**

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## Declaration

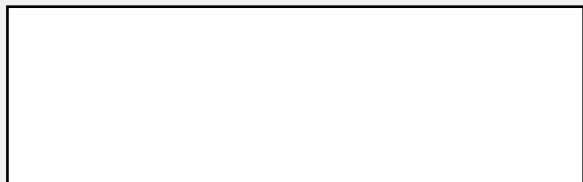
### Please read and sign

I have read and understand the information in this form and the **Notes about International Pensions Direct Payment** and wish the benefit to which I am entitled to be paid by Direct Payment into the account shown on **page 3**.

**I understand** that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.

**I declare** that the information I have given on this form is correct and complete as far as I know and believe.

**Your signature**



**Date of signature**

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## More information

### Treating people fairly

We are committed to the Equality Act 2010 and treating people fairly. To find out more about this law, search 'Equality Act' on [www.gov.uk](http://www.gov.uk)

### How DWP collects and uses information

When we collect information about you we may use it for any of our purposes.

These include:

- social security benefits and allowances
- child maintenance
- employment and training
- investigating and prosecuting tax credits offences
- private pensions policy and
- retirement planning.

We may get information about you from other parties for any of our purposes as the law allows to check the information you provide and improve our services. We may give information about you to other organisations as the law allows, for example to protect against crime.

To find out more about our purposes, how we use personal information for those purposes and your information rights, including how to request a copy of your information, please visit [www.gov.uk/dwp/personal-information-charter](http://www.gov.uk/dwp/personal-information-charter)