**NHS Pensions – Overseas mandate form**

Application for payment of pension in DOP currency by direct deposit to: **Dominican Republic**

**Part 1 - Personal details – please complete in full**

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| --- | --- |
| 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 account holder (as quoted on the bank account) Max 18 characters | | | | | | | | | | | | | | | | | |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| Bank code | | | Branch code | | | | |
|  |  |  |  |  |  |  |  |

All 8 digits are required, no hyphens, slashes or alpha characters to be entered, the Swift/ BIC code is not required

Account number (17 numeric digits, no hyphens, slashes or spaces to be entered, zeros to be added to the prefix if the account number is less than 13)

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

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|  |

#### Part 3 – Please sign below:

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| Signed: Date: |

**How we use your information**

The NHS Business Services Authority – NHS Pensions will use the information provided for administering your NHS Pension Scheme membership and processing payment of your NHS pension benefits. We may share your information to administer and pay your NHS pension, enable us to prevent and detect fraud and mistakes, for debt collection purposes, or as required by law. For more information about who we share your information with and how long we keep your personal data and your rights, please visit our website at [www.nhsbsa.nhs.uk/yourinformation](http://www.nhsbsa.nhs.uk/yourinformation)