Scottish Public Pensions Agency
Buidheann Peinnseanan Poblach na h-Alba

Application for payment of pension for **CROSS BORDER WIRES**

***New / Amending instruction**. *please delete as appropriate **Reference No:……..……..……**

Part 1 – Personal Details:

Name:
Address:
Contact Telephone Number:
Email Address:

Part 2- Overseas Bank Details:

Full Name of Bank or Financial Institution:
Branch Name / Address of Bank:
Full Name of Account holder(s). Max 35 Alphabetic characters including spaces

Account Number: Max 34 digits (Can be Alphanumeric) - no hyphens, slash or space allowed

International Bank Account Number (IBAN): Up to 34 contiguous alphanumeric characters

Bank Identification Code (Swift BIC): Full 11 character BIC required – if 8 characters last 3 = XXX

Part 3 – Please Read and Sign Below:

I wish my pension payments to be paid by direct deposit to the account noted above. I accept that charges can be collected from my pension to facilitate this transfer of funds. I understand that any overpayment arising from a change in my pension entitlement must be refunded.

Signed:……..……..……..……..……..……..……..…… Date:……..……