**NHS Pensions – Overseas mandate form**

Application for payment of pension in local currency (CZK) by direct deposit to: **Czech Republic**

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

|  |  |
| --- | --- |
| Forename:       | Family name:       |
| Membership number: SD       |
| Address:        |
| Contact telephone number:       |
| Email address:       |

# 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 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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

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

International Bank Account Number (IBAN) (24 alpha/numeric characters)

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

**Part 3 – Please sign below:**

|  |
| --- |
| 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)