Pension Reference:

Application for payment of pension in HUF currency by direct deposit to: Hungary

Part 1 - Personal Details - Please complete in full

Forename:	Family name:	
Address:		
Contact Telephone Number:		

Part 2 – Overseas Bank Details – Please complete in full

Full Name of Bank or Finand	cial Institution:		
Full Address of Bank or Fina	ancial Institution:		
Full name of the beneficiary including spaces	[,] account holder (as que	oted on the account) - up to 3	35 alphabetic characters
Bank Identification Code	<u>∋ (Swift BIC) (full 11 c</u>	haracter BIC required - if 8 charac	cters last 3 = XXX)
International Bank Accou	 unt Number (IBAN)	28 continuous alpha/numeric cha	aracters)
Account Type (0 = Cheque/Current, 1 = Saving:			
Signed:		Date:	
By signing this Form you consent details) by third party banking age you should be aware that data is n certain jurisdictions Equiniti Group and address, to comply with local	ents over which the Equiniti (necessarily transmitted outsi o and/or the Payment Agent	Group and the Payment Agent have de the UK, where Data Protection may be required to provide details	ve no control. In addition o controls may differ. In

09/02/2021 V13 Hungary