

Moving money where it's needed

Payment Mandate Barbados

Application for payment by direct deposit into a bank account

PLEASE INDICATE WHETHER THIS IS A NEW INSTRUCTION OR AN AMENDMENT TO EXISTING ACCOUNT DETAILS AMENDMENT [✓] NEW [✓] Fill in the form in CAPITAL LETTERS. Complete account number from the left & include any dashes (-). Complete Parts 1 and 2. Your bank will help you if you are not sure of the branch/bank codes. Sign Part 3. If you have nominated a cheque account, please attach a cheque, clearly marked 'CANCELLED', to this form. PART 1 Your Name:_____ Forename(s) Surname Your Full Address (including town, city and state):_____ Your Reference Number if you have one: FI2/ PART 2 Name of Bank or Financial Institution: Branch where account held:__ Town/city & State: Full Address of Bank or Financial Institution _____ Bank Local Sort/Bank Code Number: [If known] Bank BIC (SWIFT) Code This can be obtained from your bank Account Number: Currency of Account: The Account is in the Name(s) of:_____ PART 3 Please sign below Please pay my pension payments by direct deposit to the account noted above: Date: ___ Signature: __ FOR OFFICE USE ONLY Created (✓): Amended (✓): Inputter: Other (specify): Authoriser: