



APPLICATION FOR DIRECT DEPOSIT OF PENSION PAYMENTS

I hereby direct the Civil Service Superannuation Board to deposit my monthly pension on a regular basis to:

Name of Financial Institution:

Financial Institution Address:

Full Account Number: _____

Branch Number (five digits): _____

I enclose a blank cheque marked VOID for the account to which my monthly payments are to be deposited. Should I be unable to provide a void cheque, I acknowledge that it is my responsibility to ensure that the information on this form is accurate. I acknowledge that I will keep the Civil Service Superannuation Board informed of any changes in my home address, bank or bank account number.

Member Name: _____

Member Signature: _____

Date: _____

P.I.N.: _____