

# **CHANGE OF DETAILS FORM**

## PLEASE COMPLETE IN BLOCK CAPITALS AND BLACK INK

#### **Personal Details**

Superannuation/GTC number					
Surname					
Forename					
Date of Birth					
National Insurance Number					
Current Employer					

#### **Change of Name or Address**

PRESENT AD	DRESS/NAME	NEW ADDRESS/NAME						
Post Code		Post Code						
		Date change effective from						

### Change of Bank Details

	OLD DETAILS							NEW DETAILS								
Bank Name																
Account No.																
Sort Code			-			-					-			-		
Roll No.																

Signature Date	
----------------	--

Please note that it would be advisable to leave your existing bank account open until successful redirection of your monthly pension payment. This will ensure that you receive all payments without delay.

Please note, for audit purposes, any change in bank details can only be accepted in writing, not verbally. Please return this form to: SPPA, 7 Tweedside Park, Tweedbank, Galashiels, TD1 3TE.

Please send a copy of any relevant certificates e.g. Marriage.