

centrelink

Services Australia needs to know to what bank account you want your Australian pension sent. Your pension will be issued by wire transfer in your local currency.

Please note that payments may be subject to fees levied by your bank, and such fees must be paid by you.

The nominated account must be in your name, or that of your registered Services Australia nominee, or it may be a joint account with another person. If you would like to register a nominee to act on your behalf in dealings with Services Australia, please contact us.

Please attach a copy of a bank document that shows your bank details, including your account number and the name(s) of the account holder(s). Once the form is completed, please sign and return it to the address below. If you need help, contact Services Australia, International Services (contact details below).

Postal address	Services Australia International Services PO Box 7809 CANBERRA BC ACT 2610 AUSTRALIA
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Fax number	+61 3 6222 2799
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Telephone number	+61 3 6222 3455
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Note: Call charges apply—calls from mobile phones may be charged at a higher rate.

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Please provide details below for your nominated bank account you want your Australian pension to be paid to.

**Name of Bank or
Financial Institution**
**Address of Bank or
Financial Institution Branch**

Number/Street

Town/City/Postcode

Country/Region

SWIFT/BIC

Account Number

**International Bank
Account Number (IBAN)**

Name of Account Holder

**Privacy and your
personal information**

The privacy and security of your personal information is important to us, and is protected by law. We need to collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Customer statement

I have attached a copy of a bank document that shows my bank details, including my account number and the name(s) of the account holder(s).

Customer signature

Date

Customer name

**Customer's Centrelink
Reference Number**



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