

# Change of bank account form



MINISTRY OF SOCIAL  
DEVELOPMENT  
TE MANATŪ WHAKAHIATO ORA

Client number

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It's on your Community Services Card, or if you've applied for support from StudyLink or Work and Income before it's on a letter from us.

## Your details

1

### What is your full name?

First and middle names

Surname or family name

2

### What date were you born?

Day Month Year

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#### HOW TO ANSWER Q3:

If you live in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

3

### Where do you live?

Flat/House number Street name

Suburb

Town/City

#### HOW TO ANSWER Q4:

Mailing address can include a PO Box, rural delivery details, or C/O address.

4

### Is your mailing address different from where you live?

☐

No

☐

Yes



If yes, tell us your mailing address

#### HOW TO ANSWER Q5:

Please only give us contact details you'd like us to use.

5

### How else can we contact you?

Tick the best way for us to first contact you

Home phone	( )	
Mobile phone	( )	
Other phone	( )	
Email		

**ATTACHMENT FOR Q6:**

You need to provide proof of your bank account details, such as a bank statement or deposit slip.

**6****What bank account do you want your payments to be paid into?**

The account is in the name of:

The account number is:

Bank

Branch

Account number

Suffix

**ATTACHMENT FOR Q7:**

You may need to provide proof of your partner's bank account details, such as a bank statement or deposit slip.

**7****What bank account does your partner want their payments to be paid into?**

The account is in the name of:

The account number is:

Bank

Branch

Account number

Suffix

**Change details****Please change my bank account for the following:**☐

Current benefit or pension

☐

Unsupported Child's Benefit

☐

Orphan's Benefit

☐

Child Disability Allowance

☐

Other



**Please provide details below**

**Declaration**

The information I have provided is true and complete.

Your name (print)

Your signature

Day

Month

Year

Partner's name (print)

Partner's signature

Day

Month

Year