

Change of bank account form



MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Client number

 | |

Your client number can be found on your Community Services Card or SuperGold Card if you have one.

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

3

Where do you live?

Flat/House number Street name

Suburb

Town/City

HOW TO ANSWER Q3:

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

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



Tell us your mailing address

HOW TO ANSWER Q5:

Please only give us contact details you would 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 may 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

8

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

Date

Day	Month	Year

Partner's name (print)

Partner's signature

Date

Day	Month	Year