

Bank information form

Please, fill out the form with block letters.	
Your name	Your Danish CPR no. (birthday)
Address	
City code and city	Country
I want the payment transferred to a Da	nish account:
I want the payment transferred	ress recode and city Country and the payment transferred to a Danish account: I want the payment transferred to my NemKonto I want the payment transferred to the following bank ne of the bank signification number Account number and the payment transferred to a foreign bank: ne of the bank ress N number code count number shanks national code (BSB, clearing code, routing number, ABA code/fed wire)
Name of the bank	
Registration number	Account number
I want the payment transferred to a fo	reign bank:
Name of the bank	
Address	
IBAN number	
BIC code	
Account number	
The banks national code (BSB, clearing	code, routing number, ABA code/fed wire)
Date	Signature

Please complete and send the form to ATP Livslang Pension, Kongens Vænge 8, 3400 Hillerød, Denmark. Alternatively, you can submit the form at www.lifeindenmark.dk/atp-contact.