

## STATEMENT OF CHANGE OF PAYMENT METHOD

## 1. MY DETAILS AS AN APPLICANT:

First name	
Surname	
Personal identification code	
E-mail address	
Contact phone number:	
Postal address	<i>(street) (city/town) (county) (index)</i>

2. DETAILS OF THE LEGAL REPRESENTATIVE (*fill in if necessary*)

First name	
Surname	
Personal identification code	
E-mail address	
Contact phone number:	
Postal address	<i>(street) (city/town) (county) (index)</i>

## 3. I WOULD LIKE MY ALLOWANCES AND BENEFITS TO BE PAID:

 TO AN ESTONIAN BANK ACCOUNT

*If you have submitted different bank accounts to the Social Insurance Board, all benefits and allowances will be paid to the last account submitted (except payments related to a court order).*

Name of the bank:	Number of the current account:	
<b>Name of the owner of the current account</b> <i>(fill in only if this is not your current account and you want compensation/allowance to the account of a third party)</i>		
<b>Current account owner's personal identification code or registry code</b> <i>(fill in only if this is not your current account)</i>		
<b>Reference number of the current account</b> ( <i>to be filled in as needed if you want to receive the granted benefit /allowance to the bank account of a legal institution</i> )		
<b>NBI</b> <i>If you want your allowance or benefit to be paid to a bank account of a third party, it is necessary to either digitally sign the application, notarize it, or contact the customer service of the Social Insurance Board.</i>		

<b>Name of foreign bank account holder</b>	
<b>Personal identification code of a foreign bank account holder</b>	
<b>Number of the foreign bank current account</b>	
<b>BIC/SWIFT code of the foreign bank's current account</b>	
<b>Name of the foreign bank</b>	
<b>Address of the foreign bank</b>	
<b>NBI</b> <i>If you want your allowance or benefit to be paid to a bank account in joint use, you must decide who you will designate as the holder of the bank account, as a bank account can only have one holder.</i>	

 TO A FOREIGN BANK ACCOUNT

*If you want to receive your pension in a foreign bank account, the owner of the account must be the recipient of the benefit/allowance, and it is not possible to submit a third-party bank account. In the case of a bank account in joint use, the account holder must match the name of the bank account holder.*

HOME DELIVERY AT MY EXPENSE

The home delivery fee is deducted in advance from your allowance/benefit by the home delivery service provider.

The price of the home delivery service is according to the current price list (from 2023, the price of home delivery is set at 7.37 euros).

*NB! Home delivery requires the customer to be at home on a specific date set by the service provider.*

*If the Social Insurance Board pays you different types of benefits and allowances, they are all paid either to a bank account or delivered to your home.*

HOME DELIVERY AT STATE EXPENSE

*NB! Home delivery requires the customer to be at home on a specific date set by the service provider.*

*If the Social Insurance Board pays you different types of benefits and allowances, they are all paid either to a bank account or delivered to your home.*

*Explanation: the state pension is paid by home delivery at the expense of the state to a person who has a mobility impairment or who lives in a sparsely populated area and for whom bank services are difficult to access, and who is a person with a profound disability or a person receiving a national pension who has been declared permanently incapable of work or a person of retirement pension age.*

The reason why I am requesting a home delivery at the expense of the Social Insurance Board:

Address

Postal code

4. DATE AND SIGNATURE OF SUBMISSION OF APPLICATION:

. 20	My signature, i.e., the signature of the applicant:	
	The signature of the legal representative:	
<input type="checkbox"/>	I CONFIRM that the applicant or the applicant's legal representative submits the application electronically and has signed the application digitally	