

NAME OF INSURED PERSON:
(BLOCK LETTERS)

NATIONAL INSURANCE NUMBER:

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ADDRESS:

.....

DATE:

TO: The General Manager
National Insurance Scheme
Brickdam & Winter Place
Georgetown – Guyana

Dear Sir/Madam,

APPLICATION FOR PENSION TO BE PAID INTO THE BANK
(LOCAL PENSIONERS)

I am desirous of having my National Insurance Vouchers for *Old Age / Survivors / Disablement /Invalidity/ Death Pension deposited into my Bank Account. Consequently, approval is hereby sought from the National Insurance Board for the appointment of to act as my

(Name of Bank)

Representative and to receive and give all receipts on my behalf for all sums of money, which may become due owing and payable to me by the National Insurance Board. Any receipt given by my representative shall be full discharge to the National Insurance Board and Fund for such sums.

My Account Number is

.....
DATE

.....
SIGNATURE OF PENSIONER / APPLICANT

NB: If Pensioner/ Applicant cannot sign he / she would make his/her mark, which should be witnessed.

Mark of Pensioner/ Applicant:

Witness to Mark:

Address of Witness:

.....

Date:

OFFICIAL USE

EFFECTIVE DATE:

SIGNATURE OF BANK REPRESENTATIVE:

DATE:

BANK STAMP
