



Nova Scotia Teachers' Pension Plan Direct Deposit Form

As part of the Nova Scotia Pension Services Corporation's policy to ensure the reliability of payment of your monthly pension benefits, we wish to advise that a direct deposit transfer system is mandatory. This system will automatically credit your bank account with the net amount of your pension payment on the third last banking day of each month, rather than mailing the cheque to your home. This system also eliminates the problem of lost cheques and guarantees that your pension payments will continue to reach your bank account in the event of a disruption or delay in postal service.

In order to initiate the direct deposit transfer system, you must have an active account with a chartered bank, credit union or trust company in Canada which participates in direct deposits through the Canadian Banking System.

On the back side of this form you will find instructions on how to complete the Direct Deposit Form.

Please note: a **Notification of Deposit (statement of earnings and deductions) will be mailed to the address on file only when there is a change from the previous month in the amount of your gross monthly pension or tax deductions.**

Should you have any questions regarding the direct deposit transfer system or require assistance in the completion of the Direct Deposit Form, please contact our office. The completed form should be forwarded directly to the address at the bottom of this letterhead.

**HAVE YOU CHANGED YOUR ADDRESS?
– PLEASE COMPLETE**

OLD ADDRESS (WITH POSTAL CODE)	NEW ADDRESS (WITH POSTAL CODE)

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Note: All information will be treated as private and confidential.

Instructions: Please return this form to the Nova Scotia Pension Services Corporation along with a voided cheque or have your bank complete and verify the information requested in the Banking Section below. The Nova Scotia Pension Services Corporation must be advised immediately in writing of any change in your mailing address or banking details. Failure to advise us of these changes may result in error and/or delay in payment of your pension.

Return this form to: Nova Scotia Pension Services Corporation, PO Box 371, Halifax, NS B3J 2P8

Member Section – This section to be completed by YOU.

I hereby authorize the Nova Scotia Pension Services Corporation to use this information to set up my monthly pension benefit. I also acknowledge and agree that any payments made after the month in which I die or paid in error while I am alive are trust funds of the Teachers' Pension Fund and are to be returned by me, my estate or my bank upon demand.

Note: The Nova Scotia Pension Services Corporation ensures this information will be protected in compliance with our Privacy Policy.

Please indicate name and complete mailing address:

X

Signature of Pensioner

Professional Number: _____

Date of Birth: _____

Phone Number: _____

Date

Banking Section – This section to be completed by your BANK or attach a voided cheque.

Bank/Financial Institution: _____

Branch Address: _____

Province: _____

Postal Code: _____

Account Holder's Name: _____

Direct Payment Routing Number:

Inst. No.

Transit No.

Account No.

X

Signature of Banking Official

Date

