



38, Ordnance Street, Valletta VLT 1021

Contact Us: [contactus.gov.mt](http://contactus.gov.mt)

Website: [servicepensions.gov.mt](http://servicepensions.gov.mt)

Freephone 153

**Declaration**

I, the undersigned, request that my banking details are updated as indicated in this application. Therefore, I kindly request that I start receiving my service pension payments at the IBAN listed.

- I declare that all information given is to my knowledge true, complete and correct and as stipulated in accordance to the Pensions Ordinance Act ([Cap. 93.](#)). I understand that if the information given is false, I will be penalised as stipulated in the Criminal Code ([Cap. 9.](#)).
- I bind myself to inform immediately of any Service Pension related change in circumstance to the Department of Social Security.
- I understand that if for some reason or another, it is found that I was not entitled for this benefit, I will have to refund all payments received.

\_\_\_\_\_  
Beneficiary's Name and Surname

\_\_\_\_\_  
Identity Card Number

\_\_\_\_\_  
Beneficiary's Signature

\_\_\_\_\_  
Date