







APPENDIX FOR INCOME SUPPORT APPLICATION

Statement about				
	account number			
	change to an account number			

This statement must always be made to a unit of the Department of Social Services and Health Care, whenever the applicant becomes a client or whenever the applicant client changes their account number to which the income support or other corresponding benefit from the Department of Social Services and Health Care Department is paid. The applicant for the benefit must submit the notification in person and be able to prove their identity.

First, provide notification of the bank account to which the income support or other benefit is to be paid.

Applicant	Applicant's surname and first names	Personal identity number			
Bank account	IBAN account number (Finnish)	BIC bank code (Finnish)			
	, ,	, ,			
Other withdrawers	Surname and first names of other withdra	Personal identity number			
Pankkitili	IBAN account number (Finnish)	BIC bank code (Finnish)			
Applicant's/fam- ily's other bank accounts	IBAN account number (Finnish)	BIC bank code (Finnish)	Personal identity number		
Applicant's/ family's other accounts, gam-	Account number		Personal identity number		
bling accounts and foreign	Account number		Personal identity number		
bank accounts, etc.	Account number	Personal identity number			
Declaration, date and sig-	I declare that I/my family do not possess				
natures	Date	Applicant's signature and printed name			
Identity verification					
Identity verified					
driving license passport personal identity card Kela card with picture					
other, what?					
Recording date and initials					
Date Signature and printed name of the recipient of the application (official/post holder)					